THE IMPACT OF MATERNAL BASAL BMI ON OBSTETRIC OUTCOME

Dissertation submitted in partial
fulfillment of requirements for

M.S. DEGREE BRANCH II

OBSTETRICS AND GYNAECOLOGY
MADRAS MEDICAL COLLEGE
CHENNAI

THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY
CHENNAI

APRIL – 2014

CERTIFICATE

This is to certify that the dissertation titled "**THE IMPACT OF MATERNAL BASAL BMI ON OBSTETRIC OUTCOME"** is a bonafide work done by **Dr.J.UMA BRINDHA** in the Institute of Obstetrics and Gynaecology (Madras Medical College) Egmore, Chennai in partial fulfillment of the university rules and regulations for the award of MS degree in Obstetrics and Gynaecology under my guidance and supervision during the academic year 2011-2014.

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DECLARATION

I solemnly declare that this dissertation titled "THE IMPACT OF MATERNAL BASAL BMI ON OBSTETRIC OUTCOME" was done by me at Institute of Obstetrics and Gynaecology , Madras Medical College during the year 2011 - 2014 under the guidance and supervision of **Prof.DR. GEETHA PRASAD M.D.,DGO. This dissertation is submitted to The Tamil Nadu Dr.M.G.R. Medical University towards the partial fulfillment of requirements for the award of M.S. Degree in Obstetrics and Gynaecology (Branch -II)**

Place :
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ABSTRACT

THE IMPACT OF MATERNAL BASAL BMI ON OBSTETRIC OUTCOME

AIMS OF THE STUDY:

To study the incidence of abnormal BMI in our population of pregnant women and to compare the obstetric outcome in various BMI categories.

MATERIALS AND METHODS:

A crossectional study was carried out in the Instituite of Obstetrics and Gynaecology, Egmore, Chennai. 1010 pregnant women with singleton gestation who were planning to deliver in the same hospital were selected over a period of 12 months. They were placed in 4 groups based on their BMI and their outcome variables were studied.

RESULTS:

- Maternal basal BMI has strong association with pregnancy complications and outcome.
- Both obese and overweight women have an increased incidence of gestational diabetes, hypertension, rates of induction, instrumental delivery, third stage complications, macrosomia, postpartum infections and prolonged hospital stay.
- This study showed that the association between low BMI and preterm deliveries was not significant. There was an association between low BMI and low birth weight.

CONCLUSION:

As the obstetrical outcome is significantly altered due to obesity, we can improve maternal outcome by overcoming obesity. As obesity is a modifiable risk factor, preconception counseling, creating awareness regarding health risk associated with obesity should be encouraged and obstetrical complications reduced.

KEY WORDS: BMI, obesity, obstetrical outcome, preeclampsia, casaerean section

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INSTITUTIONAL ETHICS COMMITTEE
MADRAS MEDICAL COLLEGE, CHENNAI -3

EC RegNo.ECR/270/Inst./TN/2013 Telephone No:044 25305301
Fax : 044 25363970
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CERTIFICATE OF APPROVAL

To
Dr.J.Uma Brindha,
PG in MD OG,
Institute of OG,
Egmore, Chennai-8.

Dear Dr.J.Uma Brindha,

The Institutional Ethics committee of Madras Medical College, reviewed and discussed your application for approval of the proposal entitled "The impact of maternal basal BMI on Obstetric outcome" No.17082013.

The following members of Ethics Committee were present in the meeting held on 13.08.2013 conducted at Madras Medical College, Chennai -3.

1. Dr.G.SivaKumar, MS FICS FAIS --- Chairperson
2. Prof. R. Nandhini MD -- Member Secretary
   Director, Instt. of Pharmacology ,MMC, Ch-3
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7. Thiru. S. Govindsamy. BABL -- Lawyer
8. Tmt. Arnold Saulina MA MSW -- Social Scientist

We approve the proposal to be conducted in its presented form.

Sd/ Chairman & Other Members

The Institutional Ethics Committee expects to be informed about the progress of the study, and SAE occurring in the course of the study, any changes in the protocol and patients information / informed consent and asks to be provided a copy of the final report.

R Nandhini 26/8/13
Member Secretary, Ethics Committee

MEMBER SECRETARY
INSTITUTIONAL ETHICS COMMITTEE
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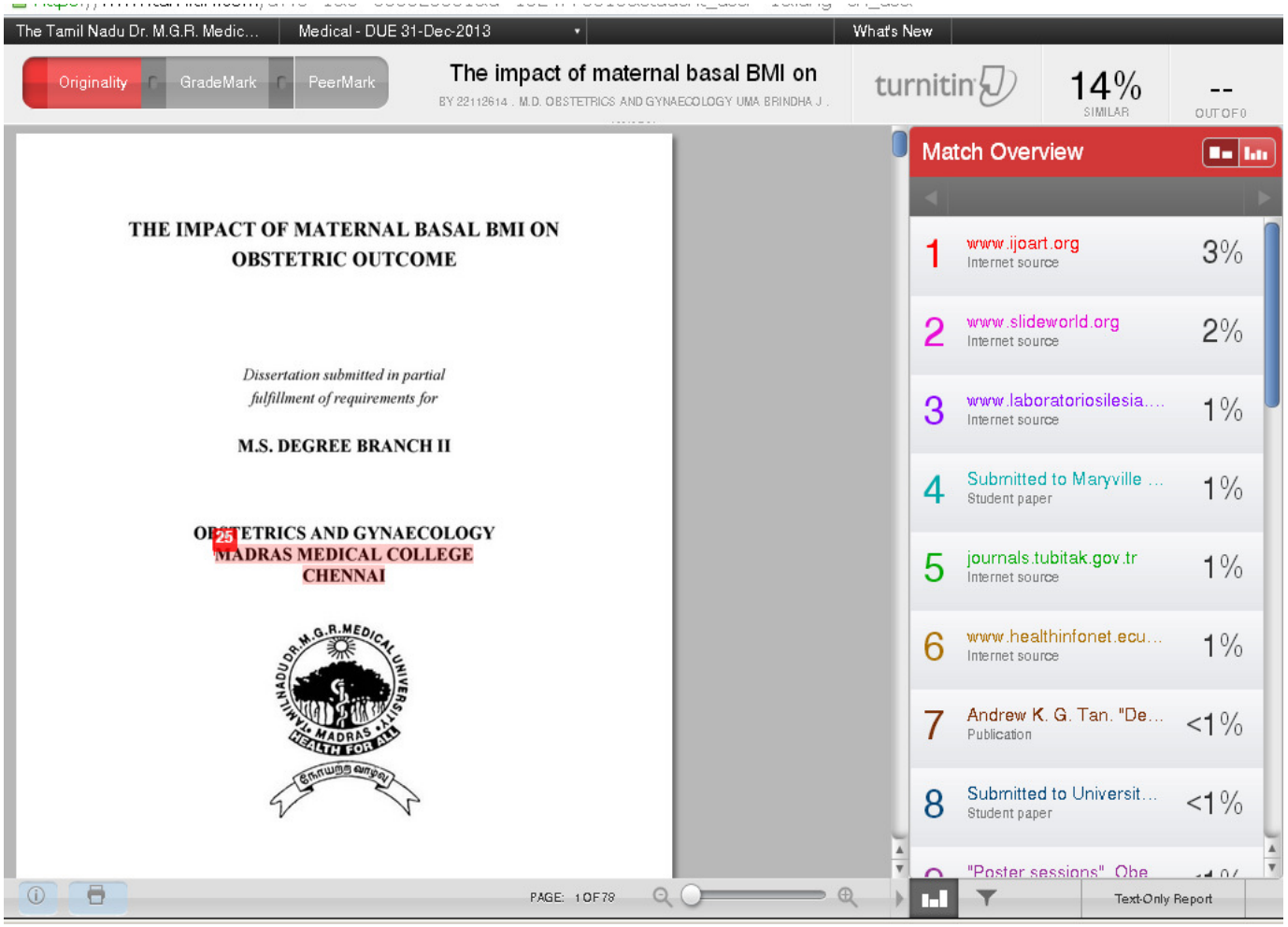
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INTRODUCTION

The body mass index (BMI), or Quetelet index, a word coined by Adolphe Quetelet, during 1830- 1850 while developing the concept of social physics. BMI reflects the nutritional status of a person. The nutritional status of pregnant women is reflected by BMI and it is important for her own health and that of the growing fetus. Both the extremes of BMI have adverse effects on the mother and the fetus.

WHO describes obesity as a 'killer disease' comparing it with HIV. Obesity is a growing health concern. Obesity has been termed an epidemic, which implies a temporary widespread outbreak of greatly increased frequency and severity. But obesity more correctly termed is an endemic, a condition that is habitually present. Obesity affects both men and women and also affects all age groups.

The increasing pattern of obesity is an important health concern in the developed countries. In developing countries like India, there is an increasing proportion of people with overweight and obesity. Lifestyle modification, urbanization, consumption of food with high

calories, increasing sedentary pattern of life and reduced physical activity are responsible for increasing obesity.

Obesity in pregnant women is a reflection of obesity in general population. Complications like miscarriages, increased rate of congenital anomalies, gestational hypertension and preeclampsia, gestational diabetes, thrombo-embolic disease, recurrent infections, sleep apnoea and prolonged pregnancy can occur in pregnant women with high BMI. Also there is an increased incidence of induction of labour, failed induction, operative vaginal delivery, large for gestational age babies, shoulder dystocia and third and fourth degree perineal lacerations. Both Elective and Emergency caesarean section rate is increased in women with obesity. Anaesthetic complications like regional blocks and difficult intubation are common in obese women.

On the contrary,in developing countries like India, we also have the problem of malnutrition. Pregnancy with low BMI is not without complications. Underweight women have an increased risk of preterm labour, low birth weight, increased incidence of anaemia. But

the incidence of preeclampsia and gestational diabetes is comparatively low.

Also weight gain during pregnancy is also important and it affects the fetal and maternal outcome. Excessive weight gain during pregnancy is associated with increased incidence of cesarean section and postpartum infections. On the other hand low weight gain is associated with anaemia, precipitious labour, low birth weight and perinatal mortality. Institution of medicine (IOM) has given guidelines for optimal weight gain during pregnancy.

AIMS AND OBJECTIVES

1. To study the incidence of abnormal BMI in our population of pregnant women.
2. To study the pattern of weight gain among various BMI categories.
3. To assess the effect of basal BMI on the obstetric outcome.
4. To compare the obstetric outcome among various BMI categories.

REVIEW OF LITERATURE

The body mass index (BMI), or Quetelet index, coined by Adolphe Quetelet, is a proxy for human body fat based on an individual's weight and height. BMI is a statistical measurement which compares height and weight. It is used to find out a healthy body weight based on the height. Although BMI does not correctly measure body fat, it gives a rough estimate of body fat. Because it is easy to measure and calculate BMI it is most often used to identify the problems in relation to weight.

BMI formula

The BMI is calculated by dividing person‘s weight by their height.

BMI = (weight in pounds/ height in inches) x 703

Or

BMI = (weight in kilograms /height in meters^2)

CATEGORIES OF BMI

The association between BMI and the fat distribution, percentage differs between various populations. So there is a need for different cut-off points for defining obesity in different ethnic groups. Hence BMI classifications vary between countries. Some countries have their own cut off for defining obesity. Japanese define obesity as BMI>25[2]. While Chinese define obesity as BMI>28[3]. Most commonly used classifications given by WHO[1] that was published in the year 2000 is,

- Underweight - < 18.5 kg/m^2
- Normal -from 18.5 to 24.9kg/m^2
- Overweight- from 25 to 29.9kg/m^2
- Obese - > 30 kg/m^2.

Obesity can be further subclassified as:

- CLASS I- BMI 30 to 35 kg/m^2
- CLASS II – BMI 35 to 40 kg/m^2
- CLASS III – BMI > 40 kg/m^2 (morbidly obese).

OTHER METHODS TO ASSESS BODY FAT:

- Skin fold thickness
- Underwater weighing
- MRI
- Infra red spectroscopy
- Dexa densitometry
- Waist hip ratio

TYPES OF OBESITY

Quantity of fat is not as significant as the distribution or location of fat. Independent of weight, abdominal fat is more dangerous and it appears to have a deleterious effect on fertility than fat deposition elsewhere in the body. Obesity can be of the following types based on the distribution of fat.

- GLOBAL –no particular defined distribution
- ANDROID - mainly in trunk and abdomen (APPLE shape obesity)

- ABDOMINAL VISCERAL OBESITY – most deleterious effects
- GYNOID - mainly in gluteofemoral region(PEAR shape obesity)

Android type (apple shape) obesity is more significant than gynoid type (pear type).

PREVALENCE OF OBESITY:

Worldwide, the prevalence of obesity is 15-20% and accounts for almost 2-7% of total health care costs[4]. In UK, about 28% of the pregnant women are overweight and about 11% are obese[5]. According to national data surveillance systems, the prevalence of obesity in the United States increased rapidly over the past three decades and this was especially evident over the past 15 years. In 2005 the percentage of U.S. adults considered obese increased from 23.2 % previously to 32.9%. In US incidence of obesity in pregnancy varies from 18.5%-38.3%. African American and Mexican American groups have shown the largest increases in the prevalence of obesity Prevalence of obesity is reported to be 36.7% in urban regions of Iran[6]. Further, obesity is more common among women than men.

PREVALENCE OF OBESITY IN INDIA:

According to NFHS 3, about 10% of Indian populations were either overweight or obese. About 20% of school populations were overweight. Similarly, percentage of married women in age 15 to 49, who are obese or over weight has been increased from 11% in NFHS 2 to 15% in NFHS 3. Prevalence varies between urban and rural areas. And more than one third of obesity occurs in high income group.

HEALTH CONSEQUENCES OF OBESITY:

Obesity increases the risk of:

- Hypertension
- Dyslipidemia
- Diabetes type 2
- Coronary artery disease
- Stroke
- Gallbladder disease
- Osteoarthritis
- Sleep apnea & respiratory problems

- Liver disease – nonalcoholic steatohepatitis (NASH)
- Thromboembolic manifestations
- Insulin resistance
- Sleep apnea
- Pulmnory dysfunction
- Cardiomyopathy
- Atherosclerosis
- Stress on weight bearing joints.

Obesity also increases the risk of breast, colon, endometrial cancer.

MANAGEMENT OF OBESITY:

A multi-faceted approach is needed

- Diet
- Physical activity
- Behaviour change

PHARMACOTHERAPY

- ***Adjunct*** to diet & physical activity
- BMI ≥ 30
- Or, BMI ≥ 27 with other risk factors
- Should not be used for cosmetic weight loss
- Use only when 6-month trial of diet & physical activity fails to achieve weight loss
- SIBUITRAMINE and ORLISTAT are used.

SURGICAL TREATMENT

- 100 pounds overweight or more
- Or, BMI > 40
- Or, BMI > 35 and 2 significant comorbidities
- Age 18 to 60
- Documented failure at nonsurgical efforts.

1. Restrictive Surgery - uses bands or staples to create food intake restriction:

- Vertical Banded Gastroplasty (VBG) - is a "pure" restrictive surgery and is the most frequently performed procedure for obesity surgery.
- Gastric Banding – involves the use of a band to create the stomach pouch.

- Laparoscopic Gastric Banding (Lap-Ba**nd)**

2. Combined Restrictive and Malabsorptive Surgery - Combination of restrictive surgery (stomach pouch) with *bypass* (malabsorptive surgery), in which the stomach is connected to the jejunum or ileum of the small intestine, bypassing the duodenum.

- Roux-en-Y Gastric Bypass (RGB) - is the most commonly performed gastric bypass procedure, and the second most frequently performed surgery for obesity after VBG.
- Biliopancreatic Diversion (BPD)

OBESITY IN PREPREGNANT WOMEN:

OBESITY AND PCOS:

Obesity is a common but not an essential feature of PCOS. About 30-60% of women with PCOS are obese. Obesity contributes modestly to the risk of developing PCOS. Obesity adds to the pathophysiology in already affected women by aggrevating the degree of insulin resistance and hyperinsulinemia. About 30% of PCOS have IGT and 10% have DM.

CHRONIC ANOVULATION:

Prevalence of obesity in women with chronic anovulation is 35 – 60%

Chronic anovulation is caused by:

1. Increased peripheral aromatization of androgens resulting in chronically elevated estrogen.
2. Decreased levels of hepatic SHBG production.
3. Insulin resistance leading to increased Insulin levels that increases androgen production in ovaries resulting in impaired follicular development.

SUBFERTILITY:

Obese women are at 3 times increased risk of infertility (Nelson piercy and Neill 2001)

- In the presence of irregular cycles

  Associated with oligo-anovulation

- In the presence of regular cycles

  anovulation even with regular cycles

  release of oocytes with reduced fertilization potential

  endometrial abnormalities

Ovulation induction poses a special challenge in obese women. This is attributed to sequestration of these drugs in adipose tissue. Most studies show that increasing dosage of both clomiphene citrate and gonadotropins are needed to induce ovulation.

Positive results were obtained in women subjects who lost 5% of body weight. Women who lost 10% body weight and waist circumference decreased by 4 cm, insulin sensitivity increased by 70%, menstrual regularity and ovulation improved.

OBESITY AND PREGNANCY:

Marked obesity is unequivocally hazardous to the pregnant woman and her fetus. Chu and colleagues(2008) have provided evidence that pregnant obese women have an increased use of healthcare services.

MISCARRIAGES:

Women with obesity have a higher risk of having miscarriages. Bellver and associates (2009) studies showed that implantation and rates of live birth were reduced with high BMI.

Listen et al showed that, in women undergoing assisted reproductive techniques, obesity and overweight is related to increased rates of miscarriages and subsequently a reduced live birth rate.

CONGENITAL MALFORMATIONS:

Many evidences support that obesity in women is associated with a higher risk of congenital anomalies. Moreover congenital malformation risk appears as a dose response, with increase in the degree of obesity. Increased triglycerides, uric acid, resistance to insulin and chronic hypoxia may be the possible mechanisms in the occurance of congenital anomalies. NTD is increased in infants of women with obesity. It may be due to low folic acid levels reaching the embryo because of poor absorption and increased metabolic demands.

Walkins et al reported a two fold higher risk for NTD, cardiac anomalies and ventral wall defects in obese women[7].

GESTATIONAL DIABETES:

Due to its strong association with obesity in general population, type 2 DM is one of the two most common medical complications of obese pregnant women[11]. The increased risk of T2DM is related to exaggerated increase in insulin resistance in the obese state[12].

The incidence of gestational diabetes in obese pregnant women is also increased when compared to the general population.

Bianco AT et al (1998) in their study of 613 patients with obesity, there was a higher incidence of GDM in the obese group (14.2%) when compared to the normal BMI group (1.2%)[10].

Glucose intolerance associated with gestational diabetes generally resolves postpartum; however, obese women with a history of gestational diabetes have a two-fold increased prevalence of subsequent T2DM compared to lean women.

PREGNANCY ASSOCIATED HYPERTENSION:

An association between obesity and hypertensive disorders during pregnancy has been consistently reported. A low level of inflammation and activation of endothelium that is seen in obesity may also play a role in the pathophysiology of preeclampsia in obese women.

Wolf and coworkers (2001) linked endothelial activation and inflammation in obesity with preeclampsia.

Ramsay and coworkers (2002) confirmed that obese pregnant women had elevated levels of IL6 and CRP as well as evidence of endothelial activation.

O'Brien and associates(2003) found that risk of preeclampsia is doubled with every by 5-7kg/m^2 increase in basal BMI[11].

Ehrenthal DB (2011) found that incidence of preeclampsia was more common in the women wih obesity[14].

Baeten JM etal (2001) found that pregnancy with increased BMI is associated with an increased incidence of eclampsia[13].

Cunningham and colleagues(1986) found that obesity and preeclampsia are cofactors in peripartum heart failure[16].

RESPIRATORY COMPLICATIONS:

Chest wall compliance is decreased and airway resistance, work of breathing are increased in obesity. Also FVC and FEV_1 are decreased in obese women. There has been a causal relationship of obesity with sleep apnoea and asthma.

Sahota et al reported increased rates of snoring, sleep apnoea and oxygen desaturation in pregnant women with obesity when compared with non-obese women.

CARDIOVASCULAR COMPLICATIONS:

Depending on the duration of obesity, profound effects were noted on vascular, endothelial and cardiac function.

Cunningham and colleagues (1986) found that obesity and preeclampsia are cofactors in peripartum heart failure[16].

THROMBOEMBOLIC COMPLICATIONS:

Many studies have shown that procoagulant factors that are increased in obesity can lead to increased risk of thrombolism[17.]

Andreasen KR has suggested in his study that obesity as a common risk factor associated with thrombo-embolic disease[27].

RCOG reports on maternal deaths includes obesity is a major risk factor for thromboembolism.

INFECTIONS:

There is an increased incidence of urinary tract infections, endometritis and postpartum wound infections.

Increased risk of urinary tract infection was reported by Usha KTS[18], but there was no increase reported in genital or wound infections[17].

Tilton Z has also reported increased risk of urinary tract infection, genital and wound infections in obese women[19].

PRETERM LABOUR:

Increased risk of preterm labour with obesity has been studied. Reasons are not clear. But it may be related to the related medical conditions associated with obesity.

Aly H etal[21] (2010) reported that obese women were more likely to deliver preterm.

Mandal D etal[22] (2011) said that preterm labor in < 34 week gestation was more common obese patients.

Hendler *et* [a20l] (2005) studied the relation between pre-pregnancy BMI and preterm birth. They found significant occurrence of preterm birth among underweight and also in obese pregnant women.

MALPRESENTATIONS:

Sheiner E et al[24] (2004) reported malpresentations that occur at a higher rate in the obese women.

Malpresentations are more common in obese women. It is difficult in obese women to palpate and detect. Also in obese women with breech presentation it is difficult to do external cephalic version.

INDUCTION OF LABOUR:

The rate of induction is more in obese women because of increased rate of hypertensive disorders, gestational diabetes or prolonged pregnancy.

Jensen DM etal[25] (2003) reported from his study that the risk of induction of labor was increased in both overweight women and obese women compared with women who were of normal weight.

Elíasdóttir ÓJ etal (2010) reported that obese women have a significantly increased incidence of requiring induction of labour compared with normal weight women.

LABOUR COMPLICATIONS:

Labour is sometimes in coordinate. Because of increased incidence of macrosomia cephalopelvic disproportion is more

common in obese individuals. Obese women have a higher risk of prolonged labour, failure of progress, oxytocin augmentation and foetal distress.

INCREASED RATE OF CESAREAN SECTIONS:

Because of the above reasons operative vaginal delivery by forceps, vacuum and cesarean section is increased.

Perlow (1997)[26] showed from his study that obese women had a higher rate of emergency cesarean delivery as well as increased operative time, increased blood loss, multiple epidural placements, higher rate of infections and prolonged hospitalization.

Pevzner L etal[28] (2009) found that the incidence of LSCS increased from 21.3% in the BMI less than 30 group to 29.8% in the BMI 30-39.9 group and 36.5% in the BMI 40 and above.

Haeri and co-workers (2009) in their study found increased rates of LSCS in obese women[31].

Lynch and associates, (2008), found higher rates of emergency cesarean section in women with obesity.

Poobalan and colleagues, (2009) also reported that higher rates of cesarean section in obese women.

Kominiarek MA etal[29] (2010) stated that the risk for cesarean section is increased as BMI increased for all subgroups, P< .001.

MACROSOMIA:

Obesity and GDM are independent risk factors associated with macrosomia[30]. Obesity is associated with increased insulin resistance and fetal hyperinsulinemia in the absence of GDM. There is an increased energy flux to the fetus along with fetal hyperinsulinemia even in obese patients without GDM which may contribute to the increased incidence of macrosomia in obese individuals. Because of macrosomia, there is an increased incidence of shoulder dystocia in obese women.

Meher-Un-Nisa etal[32] (2009), in their study reported the frequency of shoulder dystocia is high in obese females (1–7%) when compared to normal weight group (0%).

Maternal obesity is linked with obesity in childhood. It is also found that breast feeding decreases the risk of obesity in childhood. Catalano and associates (2005) found a direct association of childhood obesity with maternal prepregnancy obesity.

ANAESTHETIC COMPLICATIONS:

Obese women present anaesthesia challenges that include difficult epidural and spinal analgesia placement and complications from failed or difficult incubations. Regional anaesthesia is to be preferred to general anaesthesia.

Mace HS etal[33] (2011) reported that obese women have higher morbidity and mortality associated with regional and general anaesthesia for caesarean delivery in particular, and increased anaesthesia-associated complications.

POSTPARTUM HEMORRHAGE

Postpartum hemorrhage is also more common because of the delivery of macrosomic babies. Obese women had a 70% increase in PPH: though it is difficult to quantify blood loss there is definite need for blood transfusion. Postoperative complications are most common, veins are less accessible for transfusion and the durat ion of hospital stay is longer.

POSTPARTUM COMPLICATIONS

WOUND INFECTION

In obesity post operative wound infection are common. The Pfannenstiel incision is advantageous in obese women from the point of recovery, although it may not be a comfortable incision for delivering a large baby.

Wall and colleagues (2003) reported a fourfold increase in wound complication rate when a vertical abdominal incision was compared with a transverse incision.

Subcutaneous closure in wound thickness >2cm resulted in 6% decrease in wound disruption. There is a 2 to 3 fold increased risk of infection in overweight after caesarean delivery whether it is a primary or secondary caesarean delivery.

LACTATE DYSFUNCTION:

Obesity is associated with alteration in hypothalamic-pituitary-ovarian axis and fat metabolism resulting in failure to initiate lactation and decreased duration of lactation[1].

AFTERCARE:

Due to increased incidence of diabetes, hypertensive disorders, increased rates of instrumental deliveries, cesarean sections, increased

rates of NICU admissions and postpartum infections, there is a higher incidence of prolonged hospitalization in obese individuals.

POSTPARTUM DEPRESSION:

Lacoursiere and varner(2009) found in his study that postpartum depression is increased in obese women.

CONTRACEPTION:

Obese women have a more chance of oral contraceptive failure and higher rates of pregnancy because of altered drug metabolism.

Holt and colleagues (2009) found in their study that in women with weight more than 70.5 kg on oral contraceptives had more failure rate and pregnany was increased by 1.6 fold.

LOW BMI AND PREGNANCY:

Patient can be too lean and thin as per genetic constituition or more commonly nutritional deprivation which may arise from starvation, dietary or chronic eating disorders, such as anorexia nervosa and bulimia.

Though prepregnancy BMI has a genetic and nutritional component, in underweight women BMI is a marker of decreased tissue nutrients.

The determinants of IUGR and low birth weight that are well studied are smoking cigerettes, low BMI and low gestational weight gain. Low birth weight forms 30% of all births, with basal BMI and malnutrition as risk factors. Low birth weight rises the risk for infant mortality and morbidity. Infant mortality rate rises with decreasing birth weight.

It has been noted that underweight women have decreased cardiac output, rise in vascular disease, decreased rennin angiotensin aldosterone response and these are associated with insufficiency in uteroplacental circulation which can inturn lead to low birth weight.

Many studies show that low BMI is associated with

- preterm delivery,
- low birth weight- both small for gestational age and IUGR babies
- increased risk of anaemia,
- increased rate of perinatal mortality
- health problems like electrolyte imbalance, dehydration and depression especially if the mother was having eating disorders at the time of conception.

But there is a low risk of hypertensive disorders and gestational diabetes, decreased risk of LSCS, assisted vaginal delivery and postpartum haemorrhage.

Moutquin JM. (2003) concluded that maternal nutritional status determines the fetal size.

Hendler *et al*[20] (2005) in his study on preterm births found significant occurrence of preterm biths among lean women [23].

WEIGHT GAIN DURING PREGNANCY:

In 20th century, weight gain recommendations have changed. Strict restriction of weight gain that was first recommended in the first half was changed to considerable weight gain in 1980's. In the year 1990, Institute of medicine(IOM) has given recommendations for ranges of weight gain with the important goal to improve birth weight of the infant. Whether guidelines of IOM are the finest and only recommendation of average amount of pregnancy weight gain is another question and is not clearly studied. The risk of low birth weight rises with inadequate weight gain on a longtime.

Low weight gain during pregnancy was related [37,38] to:

- increased fetal death rates
- lower birth weight
- higher incidence of anaemia

High weight gain was associated[37,38] with:

- hypertension during pregnancy (preeclampsia)
- macrosomia
- dysfunctional labor
- Malpresentation
- cephalopelvic disproportion
- fetal distress.

The weight gain guidelines given by IOM[39] is given in the following table:

BMI CATEGORY	WEIGHT GAIN	
	KILOGRAMS	POUNDS
UNDERWEIGHT	12.5 to 18	28 to 40
NORMAL	11.5 to 16	25 to 35
OVERWEIGHT	7 to 11.5	15 to 25
OBESE	6.8 to 9.1	11 to 20

Cogswell and associates (2006) studied the pattern of weight gain in various BMI categories and found that only one third of pregnant women had weight gain within IOM guidelines.

WEIGHT REDUCTION DURING PREGNANCY:

Since maternal catabolism during pregnancy is not good for the fetus, even overweight and obese women are not advised weight loss during pregnancy. IOM also advices the same. But weight gain should be optimal.

PREGNANCY FOLLOWING BARIATRIC SURGERY:

Bariatric surgery is a good option for infertile women with morbid obesity. The pregnancy complications are less in morbidly obese women after bariatric surgery. Nutrient supplementation should be adequate for women who conceived after bariatric surgery.

Moore and colleagues(2004) and Wax did not report any long term complications in pregnant women following Roux-en Y gastric byepass surgery.

MANAGEMENT OF PREGNANCY WITH ABNORMAL BMI:

- PREPREGNANCY COUNSELLING:
  - Overweight and obese women should be counseled for weight reduction before conception.
  - Smoking and alcohol consumption should be avoided.
  - Preconceptional folic acid should be adviced
- MANAGEMENT DURING PREGNANCY:
  - BMI should be recorded at the first antenatal visit. ACOG recommends recording of BMI at first antenatal visit.
  - Advice regarding optimal weight gain during pregnancy according to their BMI should be advised.
  - Screening for GDM should be done at the initial visit and subsequently at 24-28weeks and at 32-34weeks should be done.
  - Close monitoring for hypertensive disorders should be made.
  - Anomaly screening at 11to 13weeks and 18 to 22 weeks should be made.
  - Monitoring of fetal growth profile.
  - Careful antenatal and intrapartum fetal heart rate monitoring.
  - Consider cesarean section if EFW >4.5kg in obese non-diabetic women and >4kg in a women with diabetes.

- Prophylactic antibiotics and thromboprophylaxis should be considered in obese women undergoing cesarean section.
- Breastfeeding should be started early to prevent failure of initiation of lactation
- Advice for contraception and weight reduction should be given in the postpartum period.

MATERIALS AND METHODS

This study was conducted at INSTITUTE OF OBSTETRICS AND GYNAECOLOGY, Egmore, Chennai.

TOTAL NUMBER OF PATIENTS INCLUDED IN THE STUDY:

1010 patients

STUDY METHOD:

This is a prospective descriptive study.

STUDY PERIOD:

January 2013 to December 2013.

INCLUSION CRITERIA:

- Singleton gestation
- Height >145cm
- Booking in first trimester
- Follow up, delivery at IOG Egmore.
- Normal foetal lie
- Gestational age at delivery > 28 weeks

EXCLUSION CRITERIA:

- Multiple gestation
- Pregnant women with previous LSCS
- Pregnant women with chronic diseases- HT, DM, Heart disease, Epilepsy,TB , Bronchial asthma.
- Intrauterine Fetal Demise (IUFD)

PROCEDURE:

1010 pregnant women coming to antenatal clinic, IOG, Egmore before 12 weeks and singleton gestation who are planning to deliver in the same hospital were selected. They were informed about the study and informed, written consent was obtained. Permission was obtained from hospital authorities. Approval from Instituitional review board (ethical committee) was obtained.

Detailed history was taken regarding name, age, area of residence and socioeconomic status. Obstetric history, past medical and surgical history, family history was noted. General and systematic examination was done.

Height in metres was measured by using standard charts that were fixed on the walls. Women were made to stand erect without

shoes, with both ankles together and with their heels, buttocks, occiput touching the wall. The head was held in such a position that the line joining the outer canthus of eye and tragus is horizontal line. Height was measured for all the women using the same chart. Similarly same weighing machine was used to measure weight. Weight in kilograms was noted. Height in metres and weight in kilograms were used to calculate BMI.

These women were then divided into standard BMI categories.

GROUP: 1. BMI<18.5kg/m^2

2.BMI 18.5 – 24.9 kg/m^2

3.BMI 25- 29.9kg/m^2

4.BMI >30kg/m^2

They were followed up. Their weight gain during pregnancy was also noted.

All women were screened for GDM using OGCT and cutoff of 140mg% was used. Confirmation was done with GTT. Their BP and urine albumin was checked during every antenatal check up. Investigations – CBC, blood group, HIV, HbSAg, VDRL, Urine routine were done for all patients. Atleast 3 Ultrasound examinations were done for all patients.

These women were followed to assess the outcome. No special interventions were made in the antenatal period. Babies were evaluated by the paediatrician.

All women undergoing LSCS were given the same prophylactic antibiotics. Parenteral antibiotics were continued for 5 days for all women undergoing LSCS. Duration of hospital stay after delivery in labour natural is usually not more than three days, in LSCS not more than 8 days and in instrumental delivery not more than 5 days. Any duration more than this is calculated as prolonged hospital stay.

STATISTICAL METHODS

All these datas were entered in the preformed profoma and they were tabulated and analysed by SPSS 11.5.

T-test chi square and fisher test were used for the statistical analysis. Critical value at 0.05 was significant.

Maternal and foetal outcome were studied in those groups under the following lines:

1. CONDITIONS ASSOCIATED WITH PREGNANCY: like GDM, HT.
2. LABOUR :

   -Gestational age at delivery-term/preterm

-Induced/ spontaneous onset/ elective

-Mode of delivery: Labour natural/ LSCS/ Instrumental delivery

-Complications: PPH, retained placenta, perineal injuries.

3. NEONATAL OUTCOME:

-Birth weight

-APGAR at 5 min

-NICU admission

4. POSTPARTUM PERIOD:

-Infections

-Length of hospital stay

TABLE 1: DISTRIBUTION OF BMI

BMI CATEGORY	NO.	PERCENTAGE
Under weight (<18.5)	123	12.2
Normal (18.5 to 24.9)	466	46.1
Over weight (25 to 29.9)	340	33.7
Obese (>30)	81	8.0

This table shows the distribution of BMI categories. Of the 1010 women included in the study, about 46.1% of women were in the normal BMI group. 12.2% of women belonged to underweight category. 33.7% women were overweight and 8.0% were in the obese category. Abnormal BMI is more when compared to normal BMI.

TABLE 2. CLASSIFICATION OF OBESE WOMEN

CLASSIFICATION OF OBESE WOMEN	NO. OF OBESE WOMEN (n=81)	PERCENTAGE
CLASS I(30 to 35)	68	84.0
CLASSII(36 to 40)	9	11.1
CLASSIII(40 & above)	4	4.9

This table shows the classification of obese women. 4.9% of women were morbidly obese. 84% were in class I, 11% were classII.

CHART 1

DISTRIBUTION OF BMI

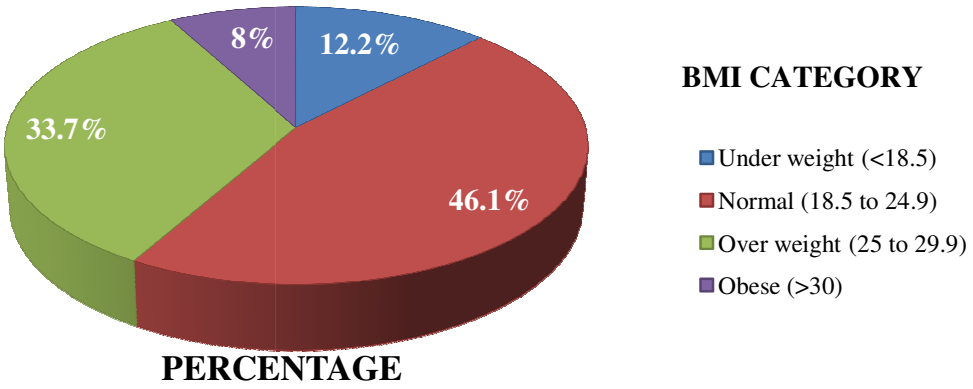


CHART 2

CLASSIFICATION OF OBESE WOMEN

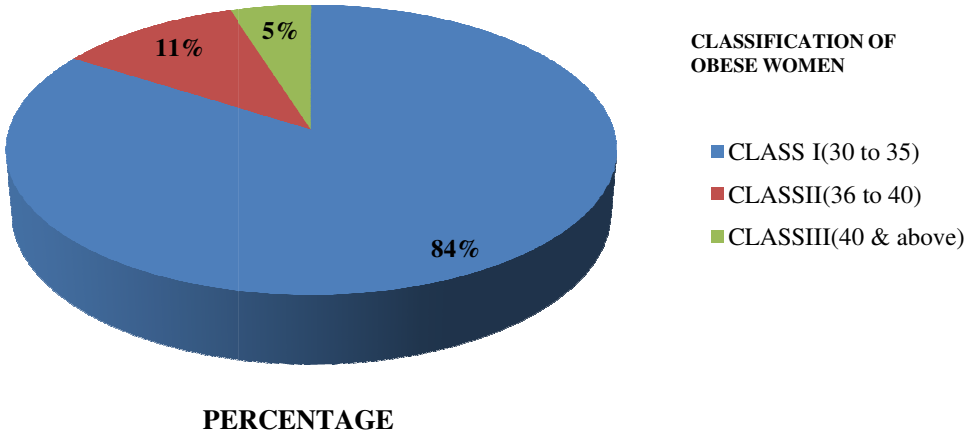


TABLE-3: DISTRIBUTION OF AGE ACCORDING TO BMI

AGE	Under weight (n=123)	Normal (n=466)	Over weight (n=340)	Obese (n=81)
<20yrs	42(**34.1**)	63(13.5)	11(3.2)	0
21 to 25yrs	56(**61.7**)	232(**49.8**)	97(28.5)	18(22.2)
26 to 30yrs	3(2.4)	142(30.5)	178(**52.4**)	48(**59.3**)
>30 yrs	2(1.6)	29(6.2)	54(15.9)	15(18.5)

This is the table showing age distribution. It shows that in underweight category – 61.7%, in normal BMI – 49.8% ie majority belong to 21-25 years.

In overweight category- 52.4% and in obese BMI- 59.3% ie majority were in age group 26-30 years. 34.1% of underweight women were <20 years. And in obese BMI category 18.5% were >30 years

CHART 3:

DISTRIBUTION OF AGE AMONG VARIOUS BMI CATEGORIES

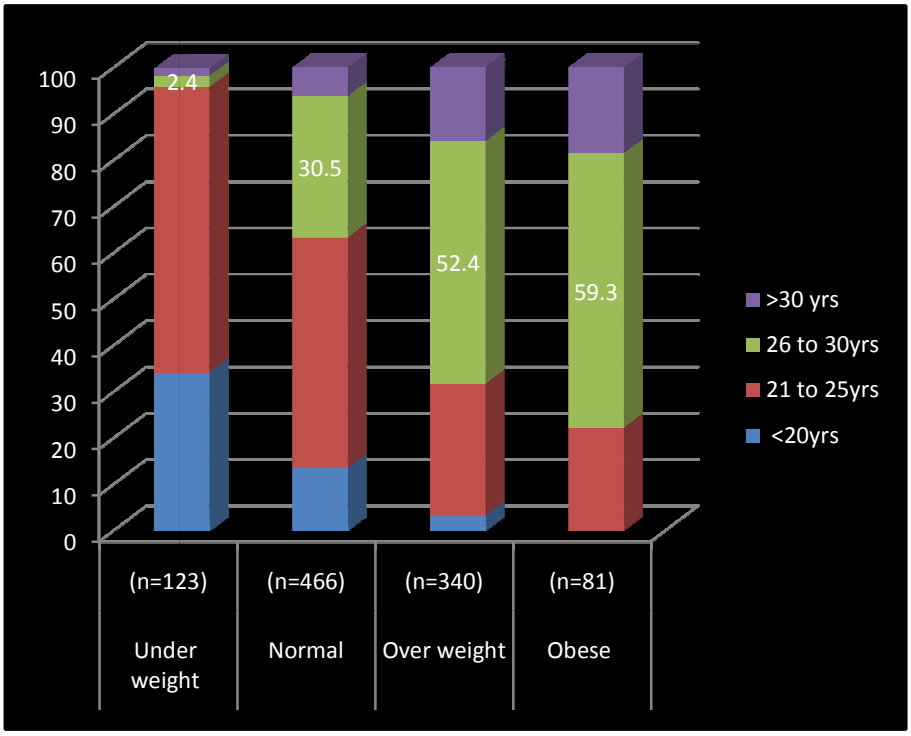


TABLE-4: SOCIOECONOMIC STATUS OF WOMEN

SOCIOECONOMIC STATUS	Under weight	Normal	Over weight	Obese
I	–	–	–	–
II	4(3.2)	29(6.2)	11(3.2)	10(12.2)
III	18(14.6)	63(13.5)	47(13.8)	4(4.9)
IV	52(42.2)	232(49.8)	198(58.2)	49(60.4)
V	49(39.8)	142(30.5)	84(24.7)	18(22.2)

This table shows the distribution of the study population among the socioeconomic classes. Most women in all BMI categories belong to classIV - underweight(42.2), normal(49.8), overweight(58.2), obese(60.4). There is no significant difference between the various BMI categories.

CHART 4

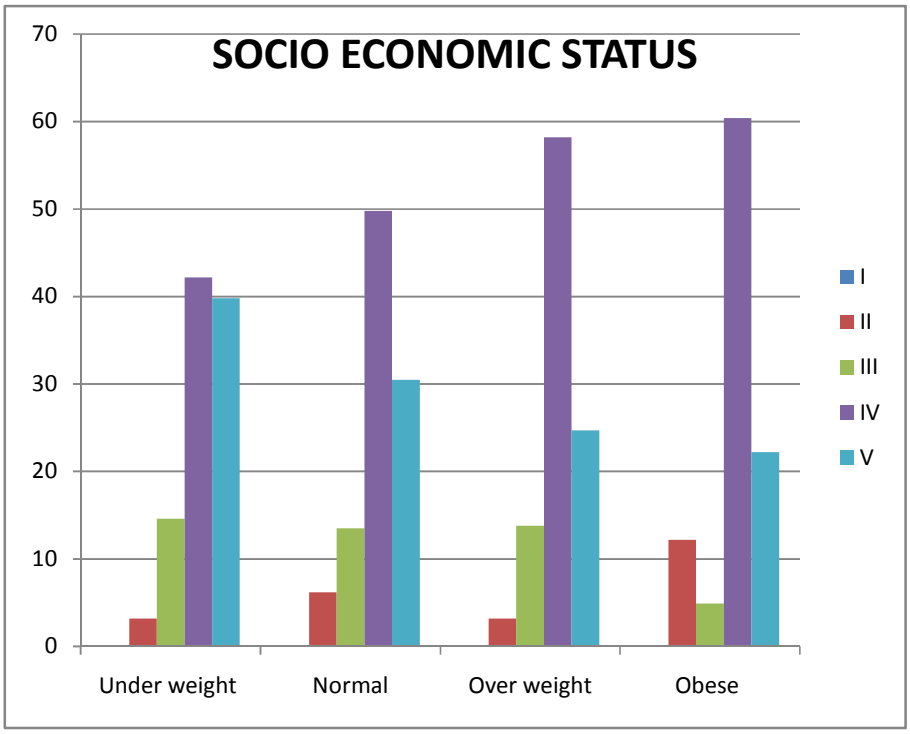

SOCIO ECONOMIC STATUS
70
60
50
40
30
20
10
0
Under weight
Normal
Over weight
Obese
I
II
III
IV
V

TABLE - 5: PARITY

PARITY	BMI			
	UNDER WEIGHT	NORMAL	OVER WEIGHT	OBESE
Primi	80(65)	305(65.5)	187(55)	41(50.6)
Multi	43(35)	161(34.5)	153(45)	40(49.4)

This table shows the distribution of primiparous and multiparous women among the different BMI categories. In normal BMI category, 65.5% were primi and 34.5% were multiparous. In underweight category 65% were primi and 35% were multiparous. While in overweight category, 55% were primi. In obese BMI category, both are almost equal with primi 50.6% and multi 49.4%.

CHART-5

PARITY

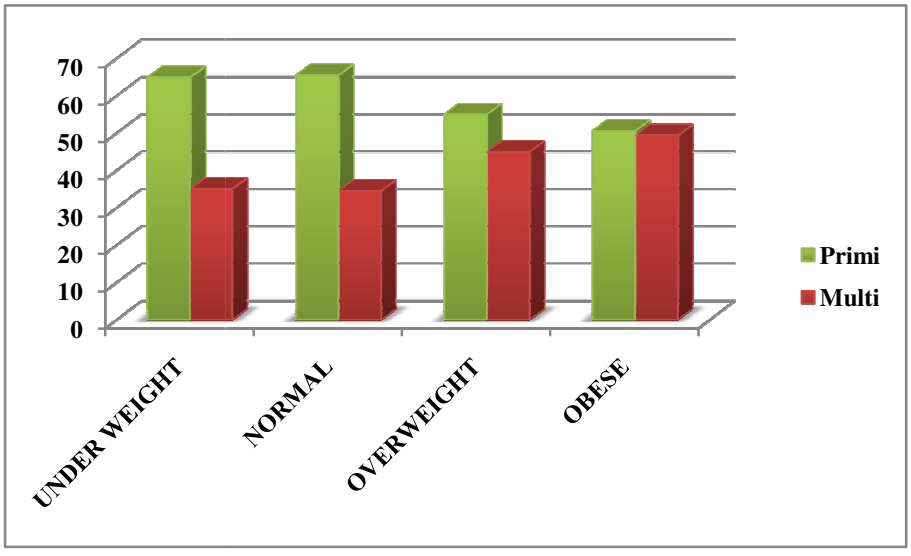


TABLE- 6: INCIDENCE OF GDM

GDM	Under weight	Normal	Over weight	Obese
Nil	123(100)	440(94.4)	314(92.4)	52(64.2)
GDM	0	26(5.6)	26(7.6)	29(35.8)

This table shows the incidence of GDM in the different BMI categories. Incidence is more in obese category about 35.8%. The incidence in normal BMI group is 5.6%. In overweight group the incidence is 7.6% with p=0.000 which is highly significant.

CHART 6

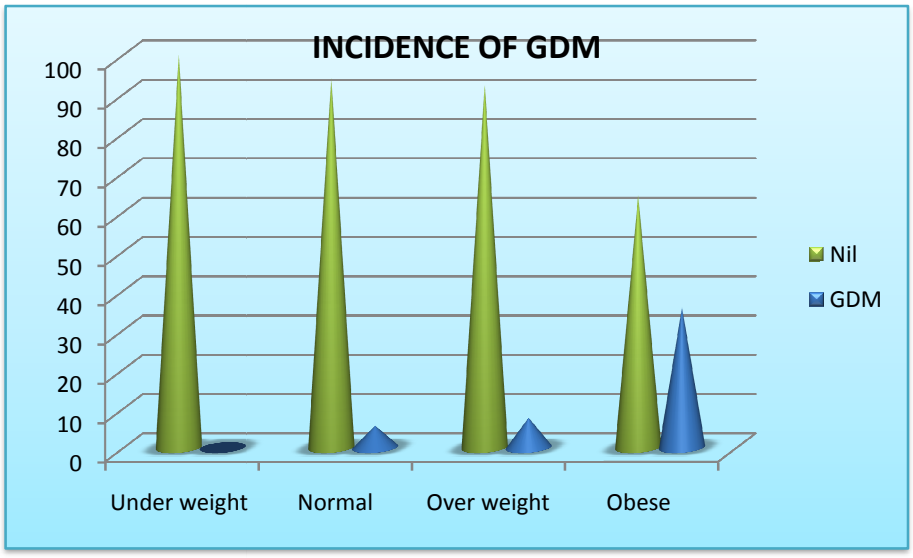


TABLE-6: INCIDENCE OF HYPERTENSION

HT	BMI			
	UNDER WEIGHT	NORMAL	OVER WEIGHT	*OBESE*
TOTAL HT	3(2.9)	39(8.3)	51(14.8)	15(19.6)
NIL	120(97.1)	427(91.7)	289(85.2)	66(80.4)

Table shows that hypertension disorders are more in obese category-19.6% & Overweight category-14.8% and on the other hand hypertension disorders in underweight category is 2.9% normal BMI category is 8.3% with p=0.0003 which is statistically significant.

CHART 6: INCIDENCE OF HYPERTENSIVE DISORDERS

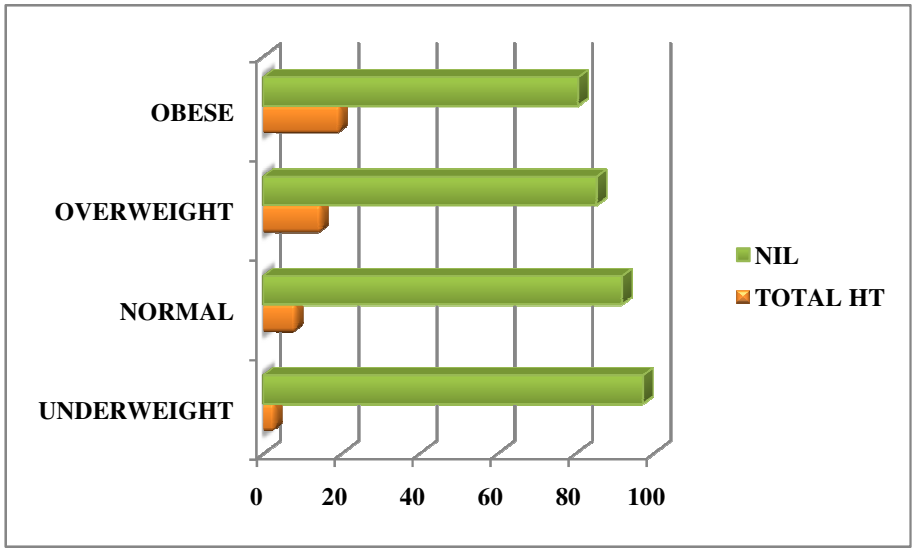


TABLE-7: INCIDENCE OF TYPES OF HYPERTENSION

HT	Under weight	Normal	Over weight	Obese
TOTAL HT	3(2.4)	39(8.3)	51(14.8)	15(19.6)
GHT	2(1.6)	13(2.7)	16(4.7)	6(7.4)
Mild	1(0.8)	12(2.5)	12(3.5)	4(4.9)
SEV	0	9(1.9)	17(5.1)	3(3.7)
ECL	0	5(1.07)	6(2.06)	3(3.7)

Table shows incidence of all type of hypertensive disorders are more in obese group – Gestational Hypertension (7.4%), Mild Preeclampsia (4.9%). Severe Preeclampsia (3.7%) & Eclampsia (3.7%) when compared to normal, underweight group.

CHART 7:

INCIDENCE OF TYPES OF HYPERTENSION

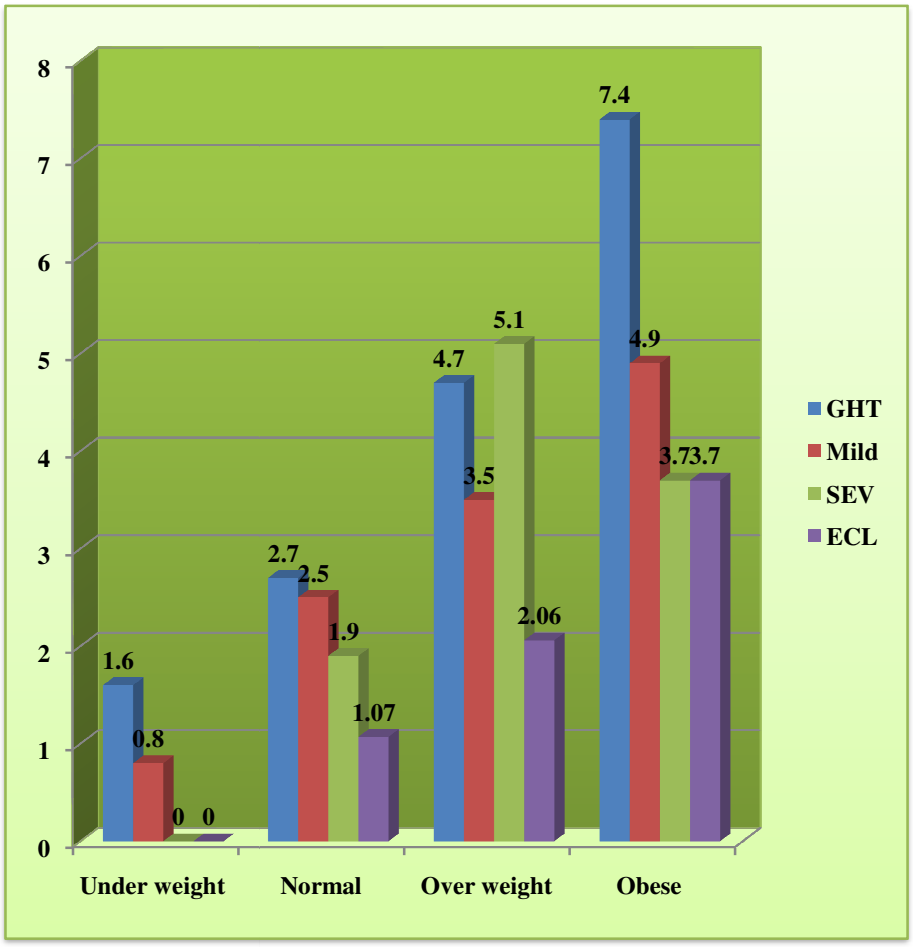


TABLE-8: ONSET OF LABOUR

ONSET OF LABOUR	Under weight	Normal	Over weight	Obese
Spontaneous	116(94.4)	426(91.4)	286(84.1)	64(79.01)
Induction	7(5.6)	37(8.01)	46(13.5)	9(11.1)
Elective LSCS	0	3(.6)	8(2.4)	8(9.9)

Table shows that the percentage of spontaneous labour is Underweight (94.4%), Normal (91.4%), Over Weight (84.1%), Obese(79.01%). Both induction of labour and Elective LSCS are more in Obese category when compared to Under weight and normal category with p=0.0001 which is highly significant.

CHART 8:

ONSET OF LABOUR

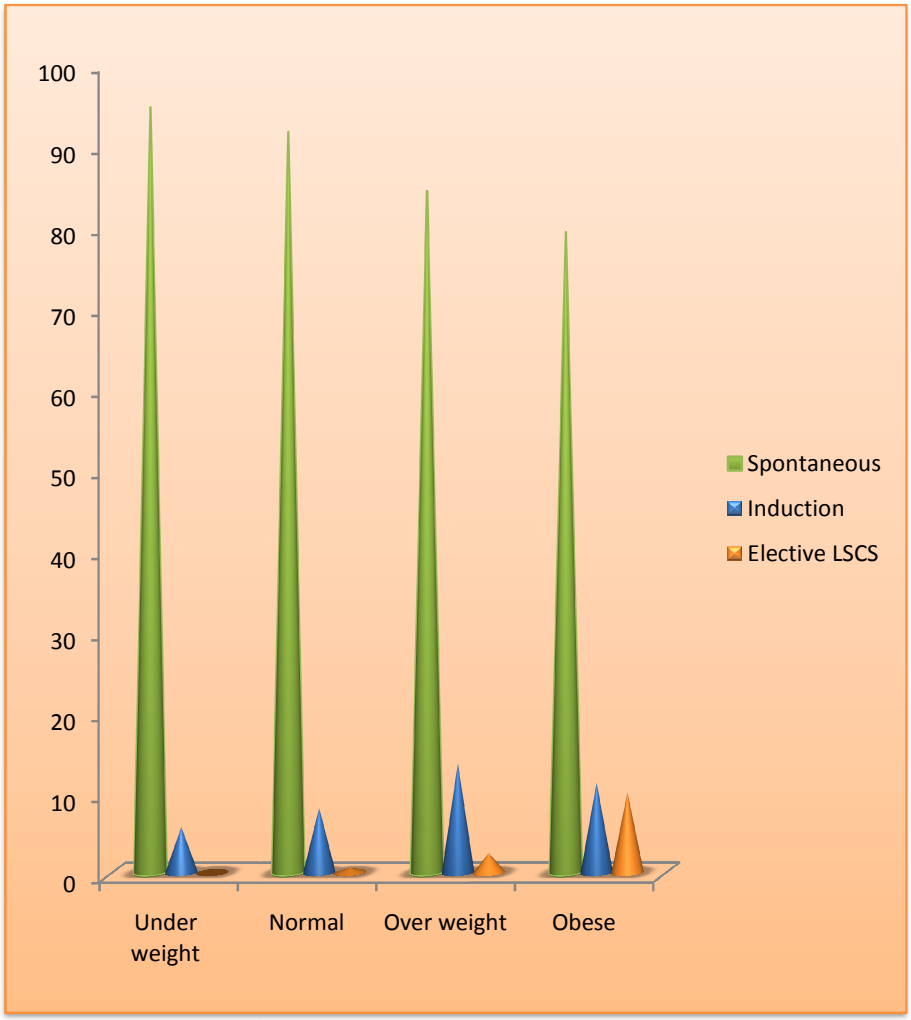


TABLE-9: GESTATIONAL AGE AT DELIVERY

GA AT DELIVERY	Under weight (n=123)	Normal (n=466)	Over weight (n=340)	Obese (n=81)
T	115(93.5)	439(94.3)	319(93.9)	59(92.6)
PT	8(6.5)	27(5.7)	21(6.1)	6(7.4)

Table shows incidence of pre term births in Under weight (6.5%), Normal (5.7%), Over Weight (6.1%), Obese (7.4%) and it is almost equal in all categories with p= 0.7149 which is statistically not significant.

CHART 9: GESTATIONAL AGE AT DELIVERY

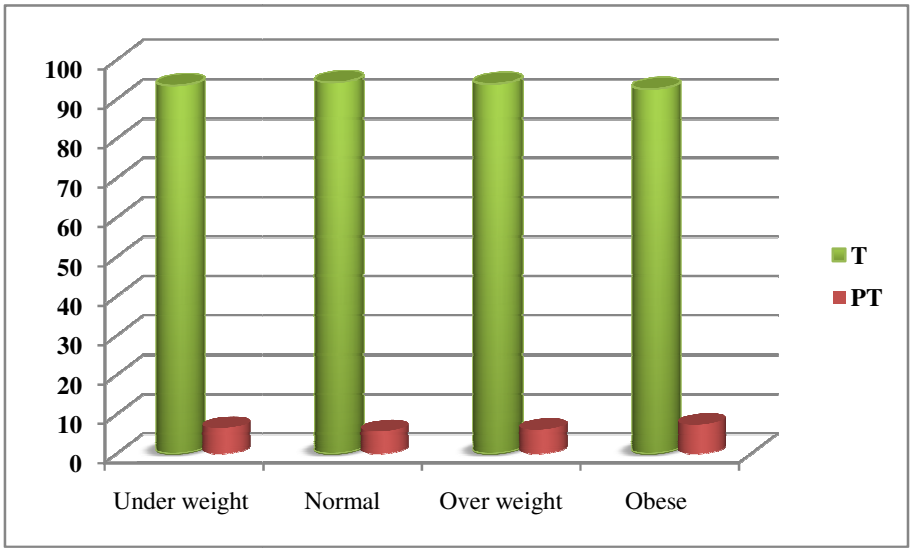


TABLE-10: MODE OF DELIVERY

MODE OF DELIVERY	Under weight	Normal	Over weight	Obese
LN	112(91.1)	366(78.5)	227(60.6)	43(53.1)
LSCS	9(7.3)	60(12.9)	81(23.8)	20(24.7)
INST.DELIVERY	2(1.6)	40(8.6)	32(9.4)	18(12.3)

Table shows that the percentage of labour Natural in Underweight (91.1%), Normal (78.5%), Over Weight (60.6%), Obese (53.1%). In both Over weight (23.8%) and Obese (24.7%) groups LSCS rates are more when compare to underweight (7.3%) and Normal groups (12.9%). In both Over weight (9.4%) and Obese (12.3%) groups Instrumental delivery rates are more when compare to underweight (1.6%) and Normal groups (12.3%) with p=0.003 which is statistically significant.

CHART 10:

MODE OF DELIVERY

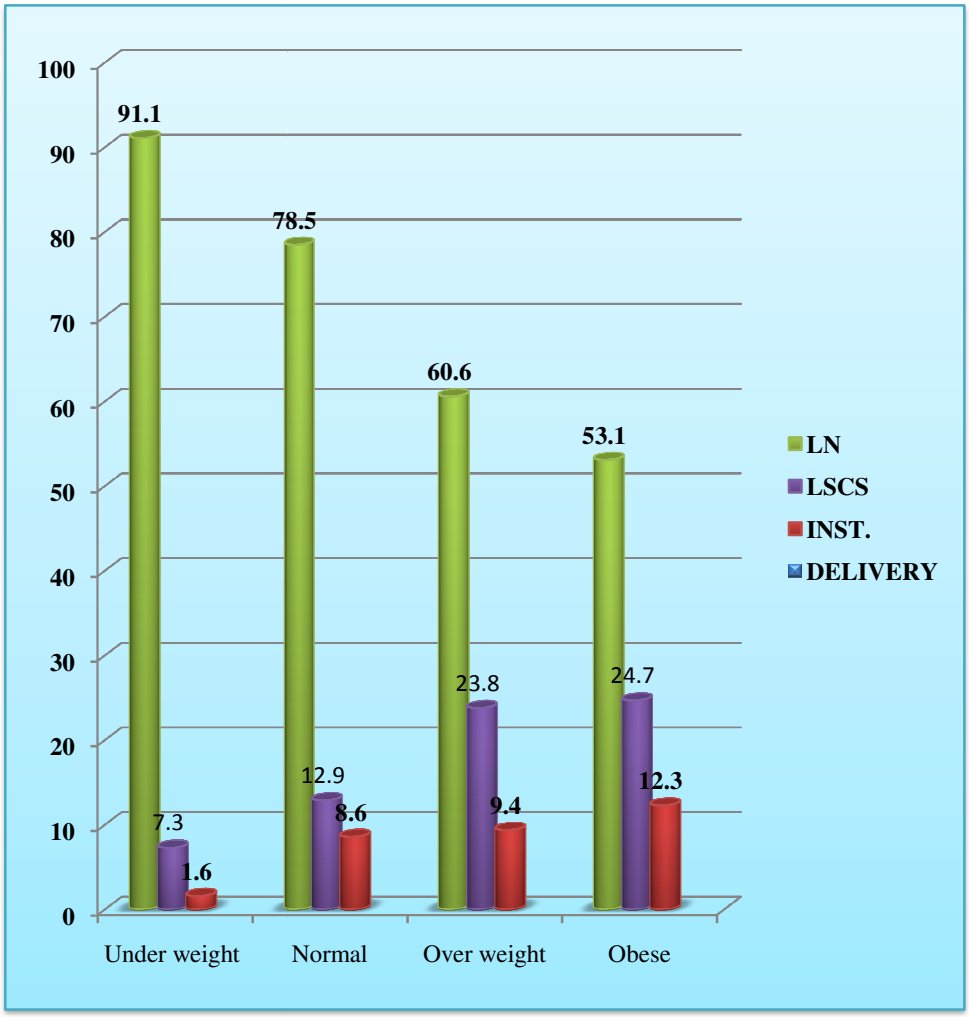


TABLE-11: CESAREAN SECTIONS IN BMI CATEGORIES

MODE OF DELIVERY	Under weight	Normal	Over weight	Obese
TOTAL LSCS	9(7.3)	60(12.9)	81(23.8)	20(24.7)
EMERG LSCS	9(100)	57(95)	73(90.1)	12(60)
Elective LSCS	0	3(5)	8(9.9)	8(40)

Table shows that both Emergency LSCS and Elective LSCS are more in Obese category with 60% and 40% respectively.

TABLE-12: INCIDENCE OF FAILED INDUCTION

ONSET OF LABOUR	Under weight	Normal	Over weight	Obese
Induction	7(5.6)	37(8.01)	46(13.5)	9(11.1)
Failed induction	1(0.8)	11(2.3)	13(3.8)	2(2.4)

This table shows that the incidence of failed induction in overweight(3.8%) and obese(2.4%) groups are higher than normal normal(2.3) and underweight(0.8%) groups which is not statistically significant p=0.721.

CHART 11:

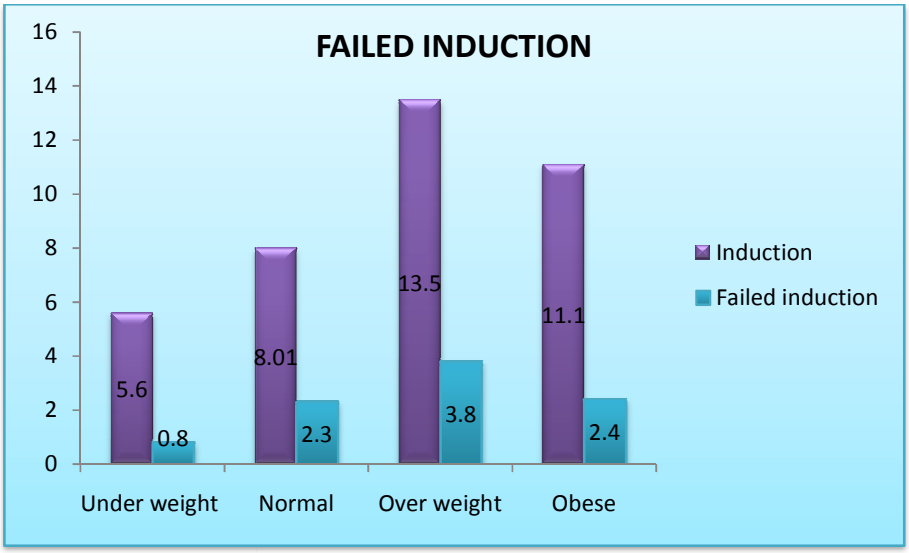


TABLE -13: INDICATION FOR LSCS

INDICATION	**Under weight**	**Normal**	**Over weight**	**Obese**
CPD	0	11(2.3)	22 (6.5)	8 (9.9)
FETAL DISTRESS	8 (6.5)	30(6.4)	27 (7.9)	6 (7.4)
FAILED INDUCTION	1(0.08)	11(2.3)	13 (3.8)	2 (2.4)
OTHERS	0	9 (1.9)	18 (5.2)	4 (4.9)

This table shows the indications for caesarean sections: CPD in under weight is nil, Normal BMI (2.3%), Over weight (6.5%) and Obese (9.9%), Fetal distress in under weight is (6.5%), Normal BMI (6.4%), Over weight (7.9%) and Obese (7.4%)

CHART 12:

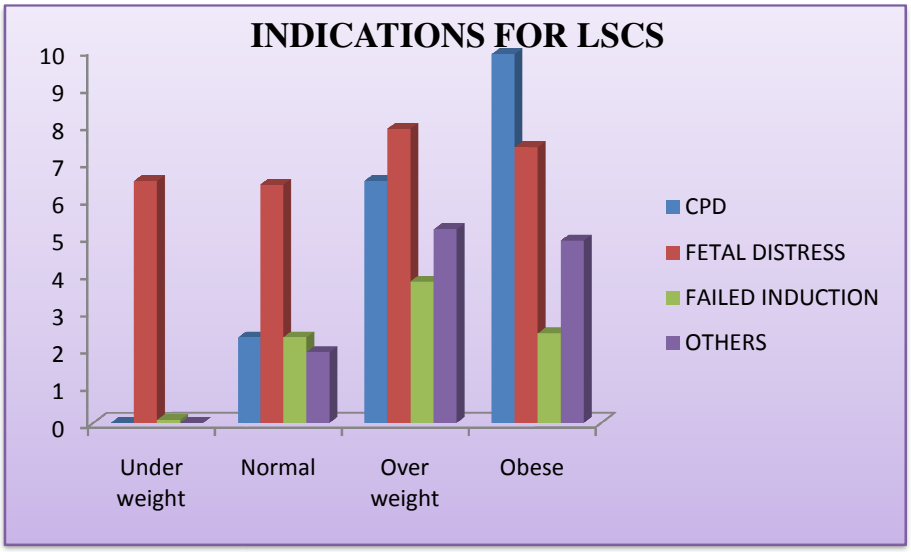


TABLE 14: INCIDENCE OF PPH

COMPLICATIONS	Under weight	Normal	Over weight	Obese
PPH	0	8(1.7%)	13(3.8%)	2(2.5%)

Table shows incidence of PPH is more in overweight (3.8%) when compare to Obese (2.5%) and normal (1.7%) with p=0.04 which is statistically significant.

CHART 13:

INCIDENCE OF PPH

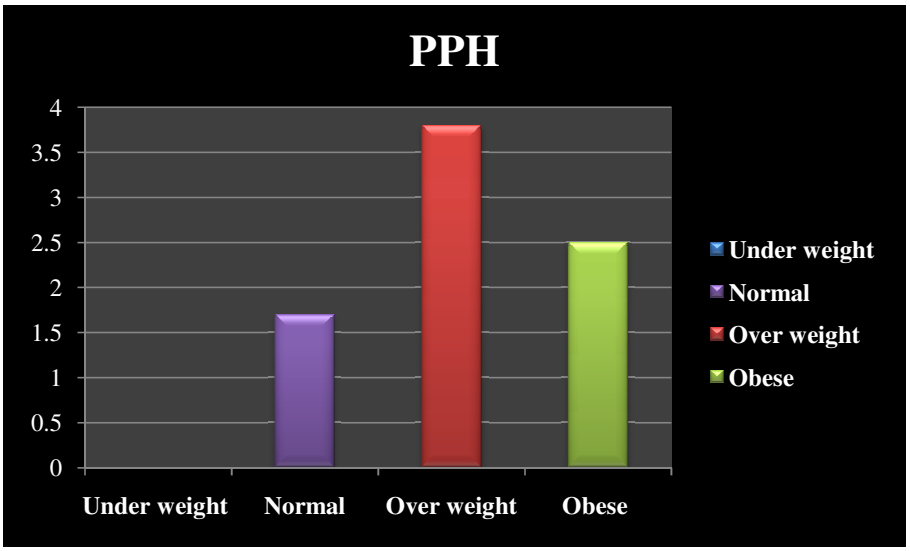


TABLE 15: INCIDENCE OF PERINEAL INJURIES AND RETAINED PLACENTA

COMPLICATIONS	Under weight	Normal	Over weight	Obese
PI	0	1(0.21)	3(0.8)	1(1.2)
RP	1(0.08)	0	4(1.1)	2(2.5)

Table shows that incidence of perineal tears and retained placenta are more in Obese category with 1.2% & 2.5% respectively with p=0.03 which is statistically significant.

INCIDENCE OF PERINEAL INJURIES AND RETAINED PLACENTA

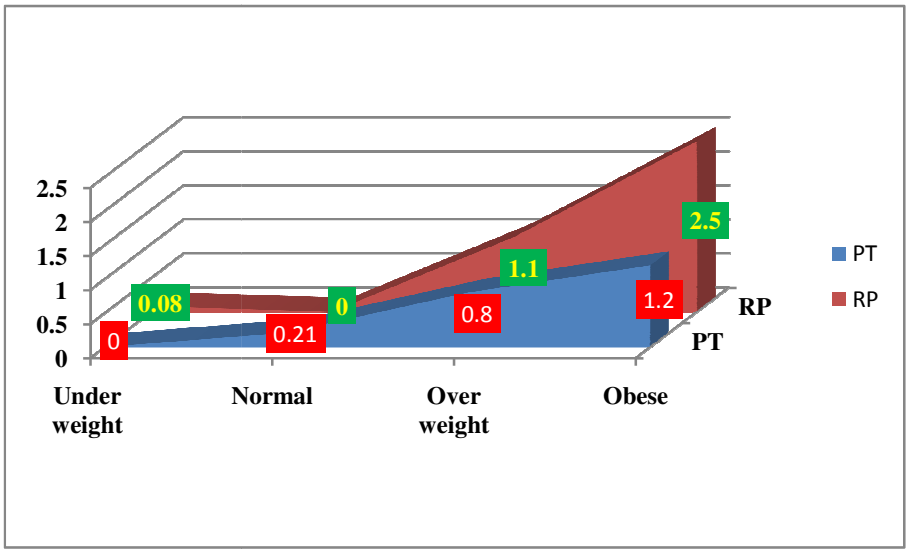


TABLE-16: MEAN BIRTH WEIGHT AMONG BMI CATEGORIES

MEAN BIRTH WEIGHT	BMI			
	UNDER WEIGHT	NORMAL	OVER WEIGHT	*OBESE*
WEIGHT	2.51	2.81	2.92	3.31

Table shows mean birth weight in underweight category is 2.51 KG, Normal BMI (2.81 KG), Overweight Category (2.92 KG) and Obese Category (3.31 KG)

CHART 15:

MEAN BIRTH WEIGHT AMONG BMI CATEGORIES

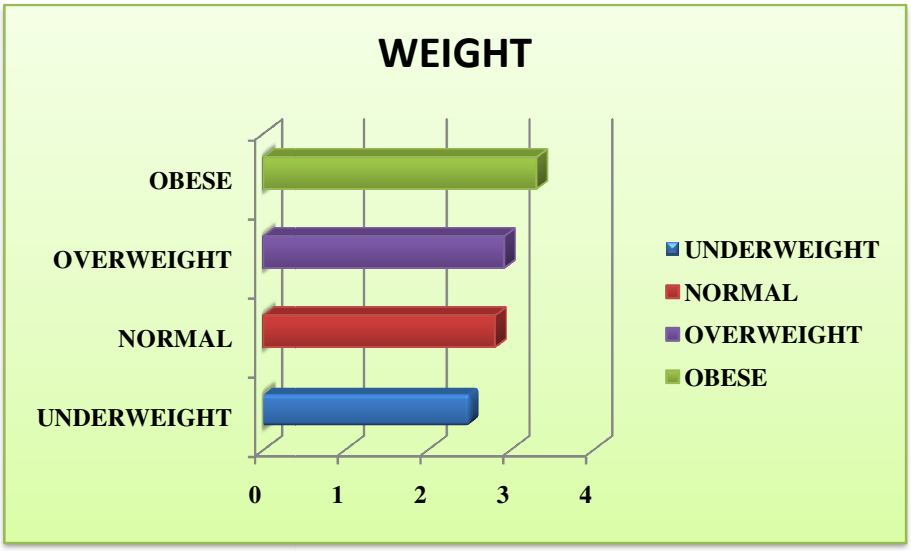


TABLE-17: INCIDENCE OF MACROSOMIA

BIRT WEIGHT	Under weight	Normal	Over weight	Obese
>4KG	0	0	4(1.1)	4(4.9)

Incidence of Macrosomia in over weight category is (1.1%) and in Obese Category is (4.9%) with p=0.04 which is statistically significant.

CHART 16:

INCIDENCE OF MACROSOMIA

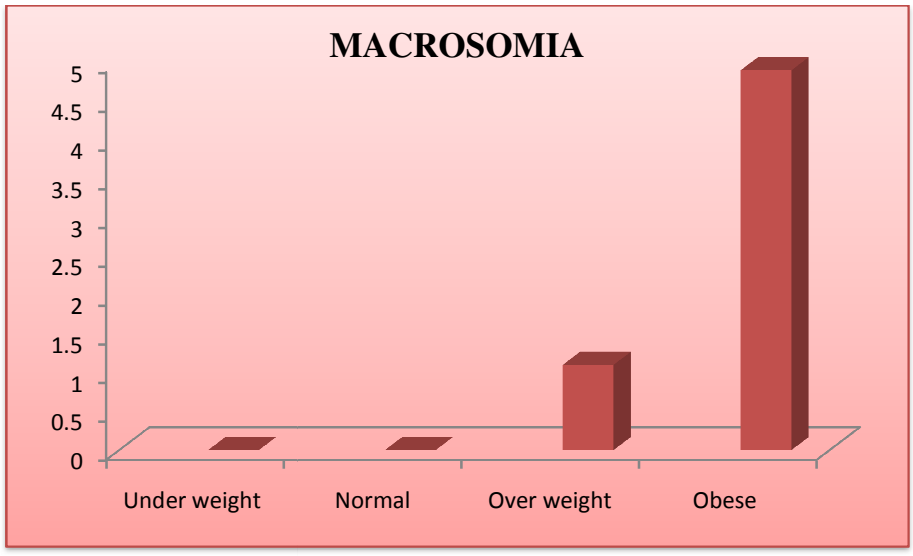


TABLE-18: INCIDENCE OF LOW BIRTH WEIGHT BABIES

Birth Weight	Under weight	Normal	Over weight	Obese
<2.5 KG	20(16.3)	34(7.2)	28(8.2)	9(11.1)

Table shows incidence of low birth weight is higher in underweight (16.3%) and Obese (11.1%) when compared to Normal (7.2%) and Over weight (8.2%) with p=0.031 which is statistically significant.

CHART 17:

INCIDENCE OF LOW BIRTH WEIGHT BABIES

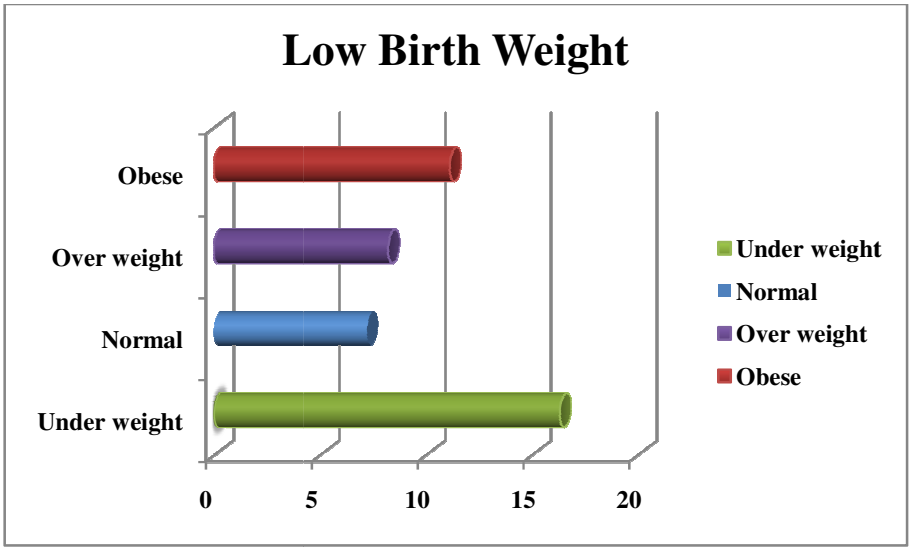


TABLE-19: INCIDENCE OF IUGR

IUGR	Under weight	Normal	Over weight	Obese
IUGR	2(1.6)	8(1.8)	9(2.6)	4(4.9%)

Table shows incidence of IUGR in Under weight (1.6%), Normal (1.8%), Over weight (2.6%) and Obese (4.9%) with p=0.201 which is statistically not significant.

CHART 18:

INCIDENCE OF IUGR

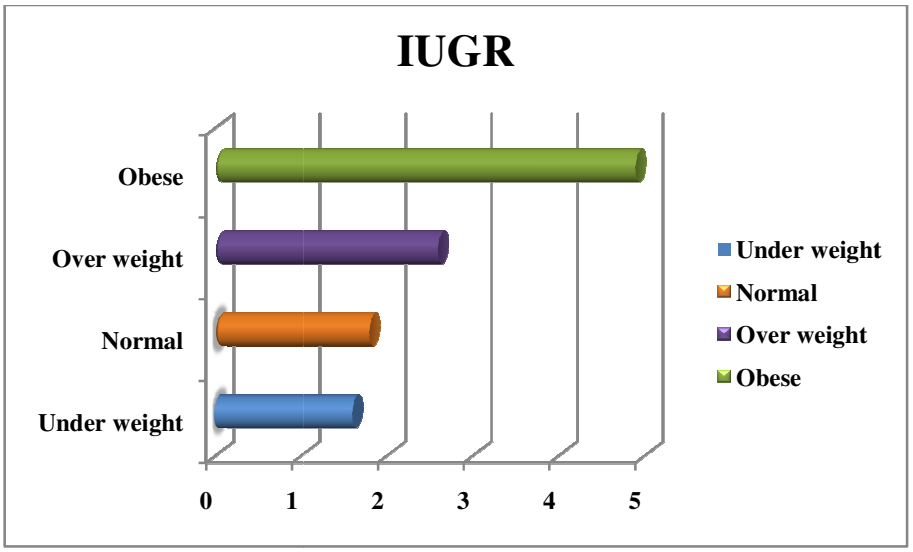


TABLE-20 NICU ADMISSION

	Under weight	Normal	Over weight	Obese
NO	104(84.5)	406(87)	281(82.6)	63(77)
YES	19(15.5)	60(13)	59(17.4)	18(33)

Table shows NICU Admission rate is more in Obese category (33%) when comparative to other categories with p=0.104 which is not statistically significant.

CHART 19: NICU ADMISSION

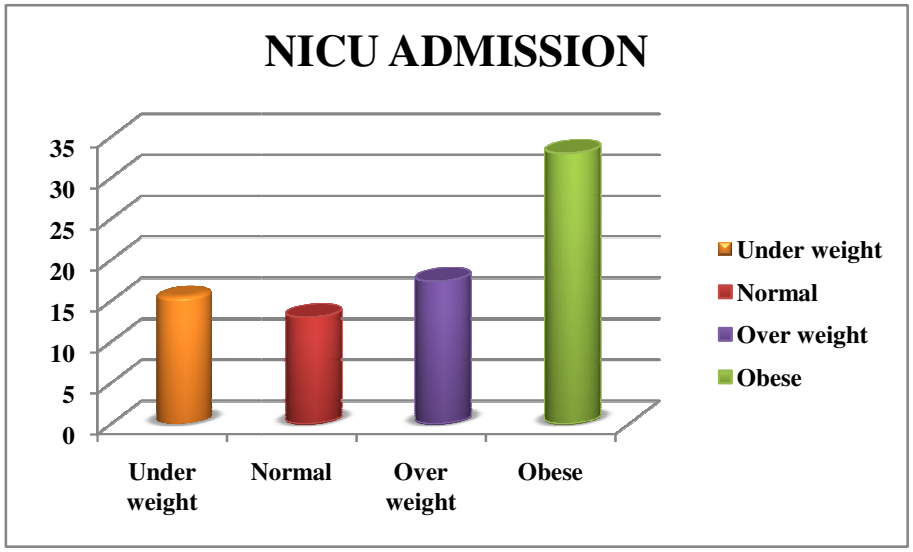


TABLE 21: MEAN APGAR AT 5 MINUTES

	Under weight	Normal	Over weight	Obese
APGAR AT 5 MINUTES	8.1	8.4	8.6	8.3

Table shows that mean APGAR at 5 minutes for Under weight is 8.1, normal is 8.4, Over weight is 8.6, Obese is 8.3.

TABLE -22: POSTPARTUM INFECTION

PP INFECTION	Under weight	Normal	Over weight	Obese
No	123(100)	457(98.1)	309(92.1)	75(92.6)
Yes	0	9(1.9%)	27(7.9)	6(7.4)

Table shows incidence of Postpartum infection is more in Over weight (7.9%) and Obese (7.4%) when compared to Normal (1.9%)

with p=0.003 which is statistically significant. There are No infections seen in under weight category

CHART-20:

POSTPARTUM INFECTION

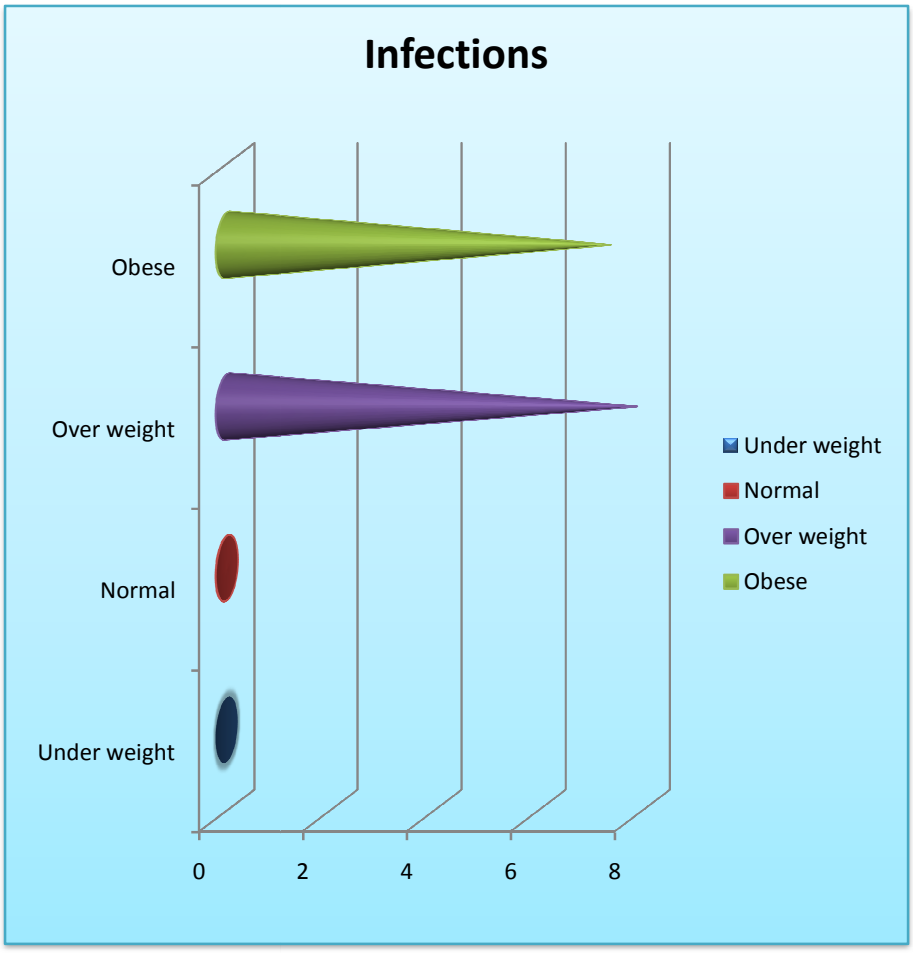


TABLE 23: LENGTH OF HOSPITAL STAY

Length of hospital stay	Under weight	Normal	Over weight	Obese
INCREASED	21(17)	77(16.5)	85(25)	28(34.5)

This table shows that duration of hospital stay is increased in obese (34.5%), Over weight (25%) when compared to and normal (16.5%) and Under weight (17%) with p=0.046 which is statistically significant.

TABLE-24: WEIGHT GAIN IN UNDERWEIGHT WOMEN

WEIGHT GAIN	NO. OF WOMEN	PERCENTAGE
Low (<12.5)	85	69.1
Normal (12.5 to 18)	38	30.9
High (> 18.5)	0	0

Table shows weight gain in underweight women is normal in 30.9% while low in 69.1%

CHART 22:

WEIGHT GAIN IN UNDERWEIGHT WOMEN

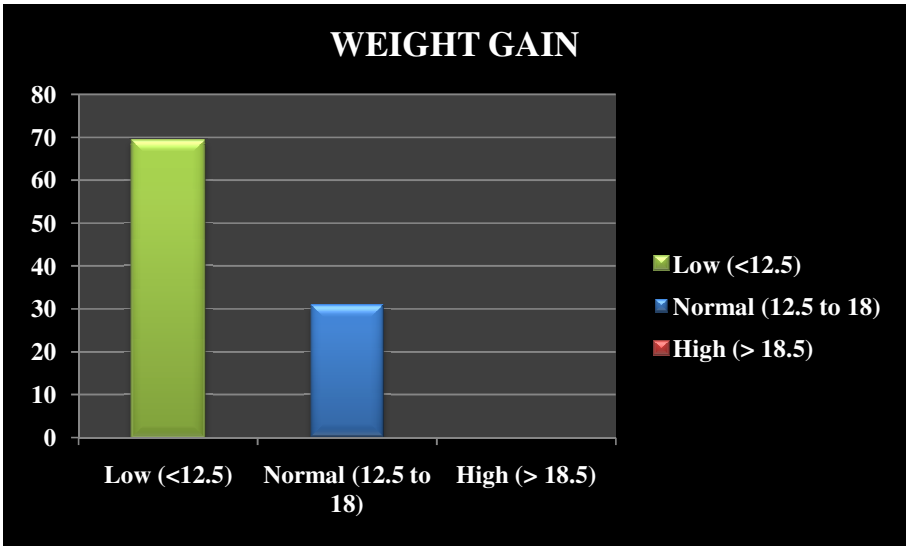


TABLE-25: WEIGHT GAIN IN NORMAL BMI WOMEN

WEIGHT GAIN	NO. OF WOMEN	PERCENTAGE
Low (<11.5)	42	9.01
Normal (11.5 to 16)	246	52.8
High (> 16)	178	38.19

Table shows weight gain in normal BMI women is high in 38.19% normal in 52.8% and low in 9.01%.

CHART 23

WEIGHT GAIN IN NORMAL BMI WOMEN

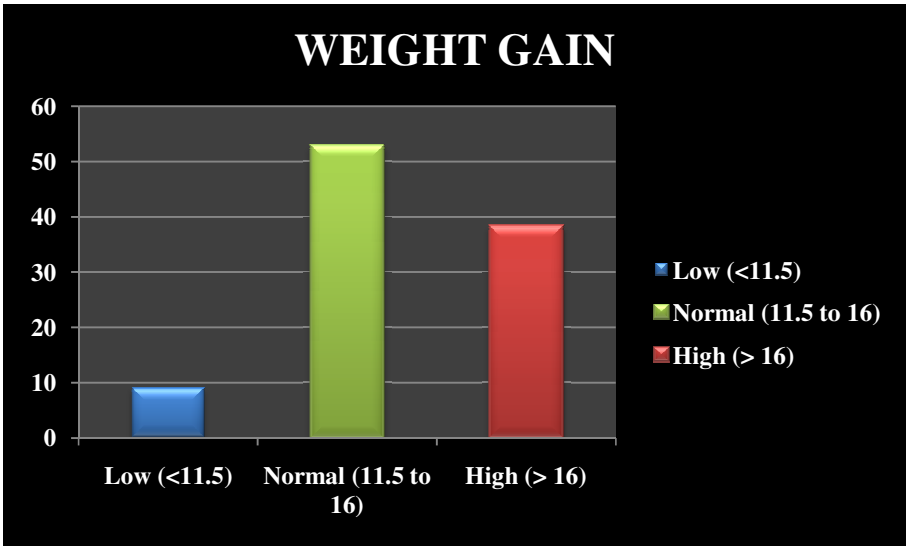


TABLE-26: WEIGHT GAIN IN OVERWEIGHT WOMEN

WEIGHT GAIN	NO. OF WOMEN	PERCENTAGE
Low (<7 KG)	0	0
Normal (7 to 11.5)	164	48.2
High (> 11.5)	176	51.8

Table shows weight gain in overweight women is high in 51.8% and normal in 48.2%.

CHART 24:WEIGHT GAIN IN OVERWEIGHT WOMEN

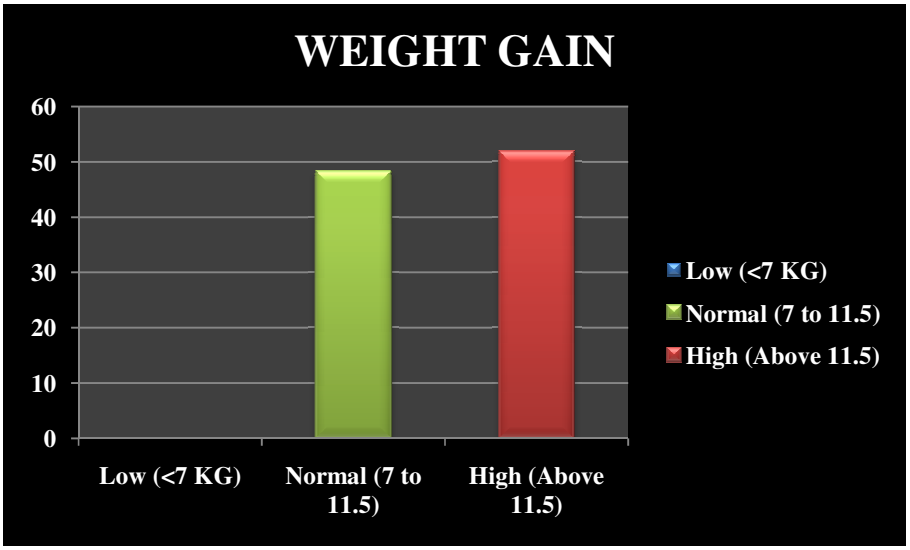


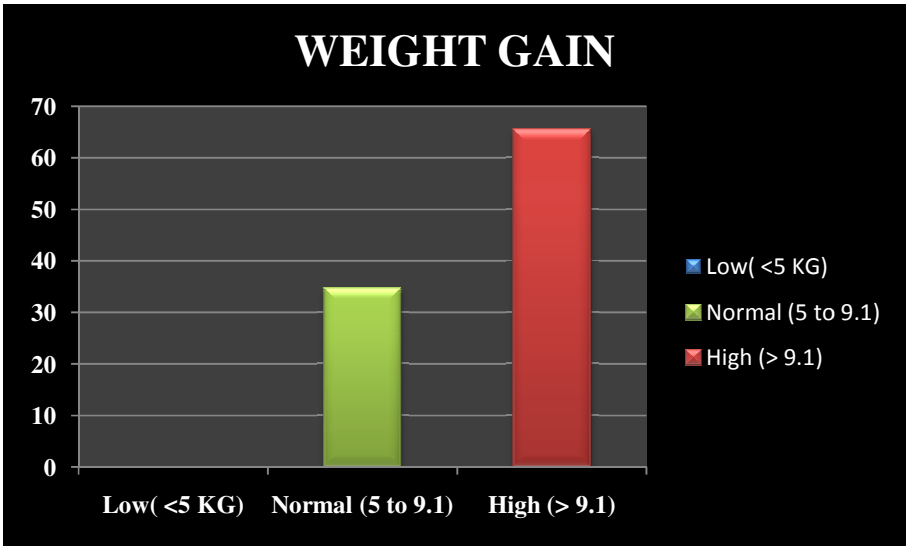
TABLE 20 WEIGHT GAIN IN OBESE WOMEN

Particulars	NO. OF WOMEN	PERCENTAGE
Low(<5 KG)	0	0
Normal (5 to 9.1)	28	34.6
High (> 9.1)	53	65.4

Table shows weight gain in Obese women is high in 65.4% and normal in 34.6%

CHART 25:

WEIGHT GAIN IN OBESE WOMEN



DISCUSSION

Various studies have been done to study the obstetric outcome in abnormal BMI. This study was done in IOG, Chennai to study the incidence of abnormal BMI and its impact on obstetric outcome.

BMI CATEGORIES:

Of the 1010 women included in the study, about 46.1% of women were in the normal BMI group. 12.2% of women belonged to underweight category. 33.7% women were overweight and 8.0% were in the obese category. Abnormal BMI is more when compared to normal BMI.

When obese women were subclassified, 4.9% of women were morbidly obese. 84% were in class I, 11% were classII.

AGE DISTRIBUTION:

The age distribution in the study shows that in underweight category – 61.7%, in normal BMI – 49.8% ie majority belong to 21-25 years. In overweight category- 52.4% and in obese BMI- 59.3% ie majority were in age group 26-30 years. 34.1% of underweight women were <20 years. And in obese BMI category 18.5% were >30 years. The mean age for underweight category is 22.4, nomal BMI

category is 23.9, overweight category is 26.5 and for obese category is 28.4years.

This could be due to the age related weight gain in these patients.

Our results were comparable with Meher-Un-Nisa etal[32] (2009) who reported that average age of obese patients was 25.2 and that of non obese was 24.1, showing that obesity was more often found in women of higher age.

PARITY:

In normal BMI category, 65.5% were primi and 34.5% were multiparous. In underweight category 65% were primi and 35% were multiparous which is similar to normal BMI category. While in overweight category, 55% were primi. In obese BMI category, both are almost equal with primi 50.6% and multi 49.4%. This shows that incidence of obesity is equal in both primi and multiparous women.

GDM:

Incidence is more in obese category about 35.8%. The incidence in normal BMI group is 5.6%. In overweight group the incidence is 7.6% . There were no cases of GDM in underweight women.

The results were comparable to the study of Bianco AT etal[10] in 1998 found in their study of obese pregnant women that there is a increased prevalence of GDM in the obese women when compared to non obese women and a higher prevalence of gestational diabetes mellitus in the obese group (14.2%) as compared to their non obese group (1.2%).

Our study is comparable to the study of Kumari et al comparing obese and nonobese patients, found a rate of GDM of 24.5% for the obese and 2.2% for the nonobese.

The risk of GDM is positively correlated with increasing BMI.

HYPERTENSIVE DISORDERS:

The hypertensive disorders are more in obese category-19.6% & Overweight category-14.8 when compared to underweight category (2.9%) and normal BMI category (8.3%).

Our results were comparable with Voigt et al (2008) who found that 17.9% patients in the BMI>30 category had preeclampsia and 1.2% in the BMI < 25 category had preeclampsia[15].

The results are similar to that of Kumari et al[51] who evaluated 159 obese women & 300 non obese women and concluded that a BMI greater than 40 was associated with hypertensive disorder of pregnancy in 28.8% compared with 2.9% in the non obese women.

Also, Baeten JM etal[13] (2001) found that incidence of eclampsia increased with increasing BMI.

Ehrenthal DB (2011)[14] also found that preeclampsia was higher in the obese pregnant women. Similarly the results are comparable to studies of Jensen,(2003), Sebire(2001).

Similarly incidence of all type of hypertensive disorders are more in obese group – Gestational Hypertension (7.4%), Mild Preeclampsia (4.9%). Severe Preeclampsia(3.7%) & Eclampsia (3.7%) and overweight category- Gestational Hypertension (4.7%), Mild Preeclampsia (3.5%) Severe Preeclampsia(5.1%) & Eclampsia (2.06%) when compared to normal, underweight group.

Sukalich *et al*[15] found a significant relation between obesity and mild and severe preeclampsia. The same has been observed in the this study.

The resuts are similar to that of Baeten JM etal (2001) who found that pregnancy with obesity is associated with an increased incidence of eclampsia.

LABOUR ONSET:

The percentage of spontaneous labour is Underweight (94.4%), Normal (91.4%), Over Weight (84.1%), Obese(79.01%). The rates of induction in overweight women (13.5%) and obese (11.1%) are more when compared to underweight(5.6%) and normal BMI(8.06%).

Our results were comparable with Elíasdóttir ÓJ etal (2010) who said that obese women have a significantly increased risk of induction of labour and being delivered by cesarean section, both emergent and elective compared to mothers of normal weight and overweight.

PRETERM BIRTH:

Incidence of pre term births in Under weight (6.5%), Normal (5.7%), Over Weight (6.1%), Obese (7.4%) and it is almost equal in all categories. There is no significant difference between the BMI categories. The difference was statistically insignificant with a p value of 0.7149.

Our study was similar to a study by Aly H etal [24](2010) who reported that mothers with obesity and morbid obesity were more likely to deliver prematurely (16.7 and 20.3%, respectively) when compared with non obese women (14.5%). However, when

controlling for confounders, obesity and morbid obesity were not associated with prematurity.

Similar results were reported by Mandal D etal[22] (2011) who said that preterm labor in less than 34 week gestation was more common in the obese patients.

A study conducted by Kalk et al[23] (2009) showed that pregnancy outcome is worst in babies from mothers with low BMI as compared to healthy weight mothers with respect to increased incidence of preterm birth lower birth weight and increased neonatal mortality. But in our study the incidence of preterm labour in underweight women were not comparable.

FAILED INDUCTION

The incidence of failed induction in overweight (3.8%) and obese (2.4%) groups are higher than normal normal(2.3) and underweight(0.8%) groups which is not statistically significant p=0.72.

Our study results were not comparable to that of Sheiner et al[50] found that obese women were more likely to have labour induction.

CESAREAN DELIVERIES:

In the Over weight (23.8%) and Obese (24.7%) groups LSCS rates are more when compare to underweight (7.3%) and Normal

groups (12.9%). Both elective and emergency LSCS rates are more in high BMI group.

Our results could be compared with those of Pevzner L etal[27] (2009) said that the incidence of cesarean delivery increased from 21.3% in the BMI less than 30 group to 29.8% in the BMI 30-39.9 group and 36.5% in the BMI 40 or higher group.

Our study results are comparable to the study of Kominiarek MA etal[29] (2010) who reported that the risk for cesarean section is increased as BMI increased for all subgroups, P< .001.

INSTRUMENTAL DELIVERY:

In both Over weight (9.4%) and Obese (12.3%) groups, Instrumental delivery rates are more when compare to underweight (1.6%) and Normal groups (12.3%).

THIRD STAGE COMPLICATIONS:

Incidence of PPH in overweight (3.8%) , Obese (2.5%) and normal (1.7%). There were no PPH in underweight group.

Incidence of perineal injuries and retained placenta are more in Obese category with 1.2% & 2.5% respectively.

Our results were comparable with Liu X etal[51] (2011) who found a significant increase in postpartum hemorrhage and perineal rupture in obese patients.

Sebire et al[52] observed 70% increased in postpartum haemorrhage. But such a difference is not noted in our study.

Bianco et al found no such difference in the incidence.

BIRTH WEIGHT:

The mean birth weight in underweight category is 2.51 KG, Normal BMI (2.81 KG), Overweight Category (2.92 KG) and Obese Category (3.31 KG).

Incidence of Macrosomia in over weight category is (1.1%) and in Obese Category is (4.9%).

Incidence of low birth weight is higher in underweight (16.3%) and Obese (11.1%) when compared to Normal (7.2%) and Over weight (8.2%) which is statistically significant.

The results are similar to that of Hendler *et al* (2005) who studied the relation between pre-pregnancy BMI and preterm birth. They found significant occurrence of preterm birth among underweight and also in obese pregnant women.

IUGR:

The incidence of IUGR in Under weight (1.6%), Normal (1.8%), Over weight (2.6%) and Obese (4.9%). The incidence is higher in obese group however this study and the study by Cedegren[51] shows that after excluding women with preeclampsia the increased

risk of IUGR with obesity was no longer statistically significant (adjusted OR1.2;95%;C10.94-1.60).

POSTPARTUM INFECTION:

The incidence of Postpartum infections is more in Over weight (7.9%) and Obese (7.4%) when compared to Normal (1.9%). There are No infections seen in under weight category.

Our results can be compared with those of Satpathy HK etal[37] (2008) who reported that following Cesarean section delivery, obese women have a higher incidence of wound infection and disruption.

Alanis MC etal (2010) reported that women with a body mass index > or = 50 kg/m2 have a much greater risk for cesarean wound complications than previously report.

DURATION OF HOSPITAL STAY

In our study, duration of hospital stay is increased in obese (34.5%), Over weight (25%) when compared to and normal (16.5%) and Under weight (17%) with p=0.046 which is statistically significant. This is due to higher incidence of GDM, preeclampsia, LSCS, higher rates of NICU admission, postpartum infections.

WEIGHT GAIN DURING PREGNANCY:

In underweight group, weight gain in underweight women is normal in 30.9% while low in 69.1%.

In normal BMI women, weight gain is high in 38.19%, normal in 52.8% and low in 9.01%.

In overweight women, weight gain is high in 51.8% and normal in 48.2%.

In obese women, weight gain is high in 65.4% and normal in 34.6%.

The results are similar to that of Cogswell and associates(2006) studied the pattrrn of weight gain in various BMI categories and found that only one third of pregnant women had weight gain within IOM guidelines.

SUMMARY

1. Study shows that incidence of abnormal BMI is more when compared to normal BMI. Most women with abnormal BMI were overweight (33.7%).

   About 8.0% were obese.
2. Majority of obese women were in classI catgory(84%). About 4.9% were morbidly obese.
3. Majority of obese and overweight women were in 26 to 30 age group. Most of the underweight and normal BMI women belong to 21 to 25 years.
4. Most of the women of all BMI categories were in socioeconomic class IV. There was no significant difference between the BMI categories.
5. It is seen that high BMI is almost equally seen in both primiparous and multiparous women.
6. Incidence of GDM is more in obese category about 35.8%. The incidence in normal BMI group is 5.6%. In overweight group the incidence is 7.6% . There were no cases of GDM in underweight women.

7. All types of hypertensive disorders are more common in obese and overweight women.
8. Incidence of preterm deliveries is almost equal in all categories. There is no significant increase of preterm deliveries in underweight or obese categories.
9. Induction of labour is more common in overweight women and obese women but statistically not significant.
10. Both elective, emergency LSCS and instrumental delivery are more in obese and overweight women and is statistically significant.
11. There is no significant difference between the BMI categories in the incidence of preterm births.
12. Third stage complications like PPH, perineal injuries and retained placenta were not noted in the underweight category. And they were comparatively higher in obese group and overweight categories.
13. Macrosomia is more in obese group. Low birth weight is higher in underweight and also in obese category.
14. When compared to normal BMI, IUGR is more in obese group.

15. In both the obese and overweight category the postpartum infections are increased.
16. In all BMI categories, weight gain pattern is not satisfactory as per IOM guidelines.

CONCLUSION

To conclude, pregnancy complications related to maternal BMI is a growing problem.

- Maternal basal BMI has strong association with pregnancy complications and outcome.
- Both obese and overweight women have an increased incidence of gestational diabetes, hypertension, rates of induction, instrumental delivery, third stage complications, macrosomia, postpartum infections and prolonged hospital stay.
- Some studies have shown that preterm labour and low birth weight is associated with low BMI. But this study showed that the association between underweight and preterm deliveries is not significant. And low birth weight is associated with low BMI
- Gestational weight gain is not satisfactory when compared to IOM guideline. More women in under weight category has gained less weight while more women in over weight and Obese category have gained more weight than recommended.

Given the major economic and medical consequence of pregnancy in these women, all attempts should be made to maintain a normal BMI in women of childbearing age. Pre-pregnancy counseling, health programs and appropriate multidisciplinary management should be done.

It appears that higher prepregnancy BMI had more adverse effects on obstetrics outcomes in our study. We should consider both prepregnancy BMI and gestational weight gain during follow-up in pregnancy and before pregnancy; women with high BMI should be advised to lose weight and not to gain much weight during pregnancy.

BIBLIOGRAPHY

1. WHO Global Strategy on Diet, Physical Activity and Health 2003. Obesity and overweight. Available at www.who.int /dietphysicalactivity/- publications/facts/- obesity/en.
2. Kananzawa M, Yoshike N, Osaka T, Numba Y. Criteria and classification of obesity in Japan and Asia-Oceania. 11 supp8: S732-S737.
3. Bei- Fan Z(December 2002). Study on optimal cut- off points of BMI and waist circumference in chinese adults.
4. Bhattacharya S, Campbell DM, Liston WA, Bhattacharya S.Effects of body mass index on pregnancy outcomes in nulliparous women delivering singleton babies. BMC Public Health 2007;7:168.
5. Yen J, Shelton JA. Increasing pre pregnancy body mass index: Analysis of trends and contributing variables. Obstet Gynecol 2005;193:1994-98.
6. Rezaeian M, Salem Z. Prevalence of obesity and abdominal obesity in a sample of urban adult population within South East of Iran. Pak J Med Sci2007;23:193-97.
7. Watkins ML, Rasmussan MA. Maternal obesity and risk of birth defects. Paediatrics.2003; 111: 1152-1158.

8. National Task Force on the Prevention and treatment of obesity. Overweight, obesity and health risk. Arch Intern Med.2000;160:898-904.
9. Catelano PM, Kirwan JP, Haugel- de mouzon S, et al. gestational diabetes and insulin resistance:J Nutr. 2003; 133: 1674S-83S.
10. Bianco AT, Smilen SW, Davis Y, Lopez S, Lapinski R, Lockwood CJ. Pregnancy outcome and weight gain recommendations for the morbidly obese woman. Obstet Gynecol 1998;91(1):97-102.
11. O' Brien TE, Ray TG, Chan WS. Maternal BMI and Risk of preeclampsia. A systematic review. Epidemiology 2003;14:368-374.
12. Voigt M, Straube S, Zygmunt M, Krafczyk B, Schneider KT, Briese V. Obesity and pregnancy--a risk profile. Z Geburtshilfe Neonatol. 2008;212(6):2015.
13. Baeten JM, Bukusi EA, Lambe M. Pregnancy complications and outcomes among overweight and obese nulliparous women. Am J Public Health 2001; 91(3): 436–40.

14. Ehrenthal DB, Jurkovitz C, Hoffman M, Jiang X, Weintraub WS. Prepregnancy body mass index as an independent risk factor for pregnancy-induced hypertension. J Womens Health (Larchmt) 2011;20(1):67-72.
15. Sukalich S, Mingione MJ, Glantz JC. Obstetric outcomes in overweight and obese adolescents. *Am J Obstet Gynecol* 2006;**195**: 851–855.
16. Cunningham FG, Pritchard JA, Hankins GVD, et al: Idiopathic cardiomyopathy or compounding cardiovascular events? Obstetric Gynecol 67:157,1986.
17. Andreasen KR, Anderen ML, Schantz AL. Obesityand pregnancy. Acta Obstet Gynecol Scand 2004;83:1022-29.
18. Usha KTS, Hemmadi S, Bethal J, Evans J. Outcome of pregnancy in a woman with an increased body mass index. Br J Obstet Gynaecol 2005;112:768-72.
19. Tilton Z, Hodgson MI, Donoso E, Arteaga A, Rosso P. Complications and outcome of pregnancy in obese women. Nutrition 1989;5:95-9.

20. Hendler I, Goldenberg RL, Mercer BM *et al.* The Preterm Prediction Study: Association between maternal body mass index and spontaneous and indicated preterm birth. *Am J Obstet Gynecol* 2005; **192**: 882–886.

21. Aly H, Hammad T, Nada A, Mohamed M, Bathgate S, El-Mohandes A. Maternal obesity, associated complications and risk of prematurity. J Perinatol. 2010 Jul;30(7):447-51.

22. Mandal D, Manda S, Rakshi A, Dey RP, Biswas SC, Banerjee A. Maternal obesity and pregnancy outcome: a prospective analysis. J Assoc Physicians India 2011;59:486-9.

23. Kalk P, Guthmann F, Krause K, Relle K, Godes M, Gossing G, et al. **Impact of maternal body mass index on neonatal outcome.** Eur J Med Res 2009; 14:216-22.

24. Sheiner E, Levy A, Menes TS, Silverberg D, Katz M, Mazor M. Maternal obesity as an independent risk factor for caesarean delivery.Paediatr Perinat Epidemiol 2004;18(3):196-201.

25. In. Jensen DM, Ovesen P, Beck-Nielsen H, Mølsted-Pedersen L, Sørensen B, Vinter C etal. Gestational Weight Gain and Pregnancy Outcomes in 481 Obese Glucose-Tolerant Women. Diabetes Care. 2005;28(9)2118-2122.

26. Perlow JH. Obesity in the obstetric intensive care patient. In: Foley M, Strong T, eds. Obstetric Intensive Care: A Practical Manual. Philadelphia: WB Saunders Co; 1997:77-90.
27. Robinson CJ, Hill EG, Alanis MC, Chang EY, Johnson DD, Almeida JS. Examining the effect of maternal obesity on outcome of labor induction in patients with preeclampsia. Hypertens Pregnancy 2010;29(4):446-56.
28. Alanis MC, Villers MS, Law TL, Steadman EM, Robinson CJ. Complications of cesarean delivery in the massively obese parturient. Am J Obstet Gynecol 2010;203(3):271.e1-7.
29. Kominiarek MA, Vanveldhuisen P, Hibbard J, Landy H, Haberman S, Learman L etal. The maternal body mass index: a strong association with delivery route. Am J of Obs & Gyne 2010;203(3):264.e1-264.e7.
30. Galtier-Dareure F, Boegner C, Bringer J. Obesity and pregnancy: Complication and cost. *Am J Clin Nutr* 2000; **71**: 1242S–1248S.
31. Ehrenberg HM, Mercer BM, Catalano PM. The influence of obesity and diabetes on the prevalence of macrosomia. *Am J Obstet Gynecol* 2004; **191**: 964–968.

32. Meher-Un-Nisa, Aslam M, Ahmed SR, Rajab M, Kattea L. Impact of obesity on fetomaternal outcome in pregnant saudi females. Int J Health Sci (Qassim) 2009;3(2):187-95.
33. Mace HS, Paech MJ, McDonnell NJ. Obesity and obstetric anaesthesia. Anaesth Intensive Care 2011;39(4):559-70.
34. Abrams, B, Altman, SB, Pickett, KE. Pregnancy weight gain:still controversial. American Journal of Clinical Nutrition May 2000:71 1223-1241.
35. Crane JM, White J, Murphy P, Burrage L, Hutchens D.The effect of gestational weight gain by body mass index on maternal and neonatal outcomes J Obstet Gynaecol Can.Jan 2009: 31: 28-35.
36. Institute of Medicine. Weight Gain During Pregnancy:Reexamining the Guidelines; Committee to Reexamine IOM Pregnancy weight Guidelines; Sponsor Briefing May 27, 2000.
37. Satpathy HK, Fleming A, Frey D, Barsoom M, Satpathy C, Khandalavala J. Maternal obesity and pregnancy. Postgrad Med 2008;120(3):E01-9.

38. Rössner S, Öhlin A. Maternal Body Weight And Relation To Birth Weight. Acta Obstetricia et Gynecologica Scandinavica 1990;69(6):475–478.
39. Bringer J, Galtier F, Raingeard I, Boulot P, Renard E. Pregnancy and overweight: underestimated consequences? Bull Acad Natl Med 2008;192(4):67387.
40. Oken E. Excess gestational weight gain amplifies risks among obese mothers. Epidemiology 2009;20(1):82-3.
41. Wax JR. Risks and management of obesity in pregnancy: current controversies. Curr Opin Obstet Gynecol 2009;21(2):117-23.
42. Blomberg MI, Källén B. Maternal obesity and morbid obesity: the risk for birth defects in the offspring. Birth Defects Res A Clin Mol Teratol 2010;88(1):35-40.
43. Chen M, McNiff C, Madan J, Goodman E, Davis JM, Dammann O. Maternal obesity and neonatal Apgar scores. J Matern Fetal Neonatal Med 2010;23(1):89-9. 47. Wise LA, Palmer JR, Heffner LJ, Rosenberg L. Prepregnancy body size, gestational weight gain, and risk of preterm birth in African-American women. Epidemiology 2010 Mar;21(2):243-52.

44. Liu X, Du J, Wang G, Chen Z, Wang W, Xi Q. Effect of pre-pregnancy body mass index on adverse pregnancy outcome in north of China. Arch Gynecol Obstet. 2011;283(1):65-70.

45. Ulman-Włodarz I, Nowosielski K, Romanik M, Pozowski J, Krawczyk P. Pregnancy and delivery course in overweight and obese women. Ginekol Pol 2009;80(10):744-5.

46. Briese V, Voigt M, Hermanussen M, Wittwer-Backofen U. Morbid obesity: pregnancy risks, birth risks and status of the newborn. Homo 2010;61(1):64-72.

47. Kanadys WM, Leszczyńska-Gorzelak B, Oleszczuk J. Obesity among women. Pregnancy after bariatric surgery: a qualitative review. Ginekol Pol 2010;81(3):215-23.

48. Nelson SM, Matthews P, Poston L. Maternal metabolism and obesity: modifiable determinants of pregnancy outcome. Hum Reprod Update 2010;16(3):255-75.

49. Lapolla A, Marangon M, Dalfrà MG, Segato G, De Luca M, Fedele D etal. Pregnancy outcome in mEhrenberg HM, Dierker LRN, Milluzzi C, Mercer BM. Prevalence of maternal obesity in an urban center. *Am J Obstet. Gynecol* 2002; **187**: 1189–1193.

50. Langer O, Yogev Y, Xenakis EM, Brustman L. Over weight and obese in gestational diabetes: The impact on pregnant outcome. *Am J Obstet Gynecol* 2005; **192**: 1768–1776.

51. Ehrenberg HM, Mercer BM, Catalano PM. The influence of obesity and diabetes on the prevalence of macrosomia. *Am J Obstet Gynecol* 2004; **191**: 964–968.

52. Cnattingius S, Bergstrom R, Lipworth L, Kramer MS. Prepregnancy weight and the risk of adverse pregnancy outcomeorbidly obese women before and after laparoscopic gastric banding. Obes Surg 2010;20(9):1251-7.

PROFORMA OF THE STUDY

NAME **AGE** **O.P/IP.NO** **LMP:**

EDD:

GESTATIONAL AGE:- (FROM L.M.P/USG)

OBSTETRICAL SCORE:-

SOCIOECONOMIC STATUS:-

SINGLETON/MULTIPLE PREGNANCY: (FROM USG)

ANY CHRONIC DESEASES:- YES/NO

MODE OF PREVIOUS DELIVERY:- VAG/C.S

PLANNING TO DELIVER AT IOG:- YES/NO

HEIGHT:-

WEIGHT1- AT INITIAL VISIT:- **BMI:**

WEIGHT 2- AT DELIVERY:-

WEIGHT GAIN:-

ASSOCIATED OUTCOME VARIABLES

GESTATIONAL AGE AT DELIVERY:- TERM/PRETERM

ONSET OF LABOUR:- SPONTANEOUS/INDUCED/ELECTIVE

MODE OF DELIVERY: LABOUR NATURAL

LSCS

INSTRUMENTAL DELIVERY

INDICATION FOR C.S:-

NEONATAL BIRTH WEIGHT / FETAL OUTCOME

APGAR SCORE AT 1 AND 5 MINUTES

POSTPARTUM INFECTION : YES/NO

DURATION OF HOSPITAL STAY:

PATIENT CONSENT FORM

Title of the Project

THE IMPACT OF MATERNAL BASAL BMI ON OBSTETRIC OUTCOME

Institution : **INSTITUTE OF OBSTETRICS & GYNAECOLOGY,**
Egmore, Chennai-600008.

Name : Date :

Age : IP No. :

Sex : Project Patient No. :

The details of the study have been provided to me in writing and explained to me in my own language.

I confirm that I have understood the above study and had the opportunity to ask questions.

I understood that my participation in the study is voluntary and that I am free to withdraw at any time, without giving any reason, without the medical care that will normally be provided by the hospital being affected.

I agree not to restrict the use of any data or results that arise from this study provided such a use is only for scientific purpose(s).

I have been given an information sheet giving details of the study.

I fully consent to participate in the above study.

_____ _____ _____

Name of the subject Signature Date

KEY TO MASTER CHART

SE CLASS	:	Socioeconomic Class
GDM	:	Gestational Diabetes Mellitus
HT	:	Hypertension
GHT	:	Gestational Hypertension
MILD	:	Mild Preeclampsia
SEV	:	Severe Preeclampsia
ECL	:	Eclampsia
T	:	Term
PT	:	Preterm
S	:	Spontaneous
G	:	Gel Induced
LN	:	Labour Natural
LSCS	:	Lower Segment Cesarean Section
OU	:	Outlet Forceps
VAC	:	Vacuum Assisted Delivery
PPH	:	Postpartum Haemorrhage
RP	:	Retained Placenta
PI	:	Perineal Injuries

MASTER CHART

S.NO	NAME	SE CLASS	I.P NO.	Age	OBSTETRIC SCORE	BMI	WEIGHT GAIN	GDM	HT	GA AT DELIVERY	ONSET OF LABOUR	MODE OF DELIVERY	INDN FOR LSCS	COMPLICATIONS	BIRTH WEIGHT	APGAR AT 5 MIN	NICU ADMSN/ CAUSE	PP INFECTION	LENGTH OF HOSPITAL STAY/ CAUSE
1	PINKY	III	32	18	PRIMI	23.2	10.4	-	-	T	S	LN			2.8	8			3
2	MUTHULAKSHMI	III	45	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	9			4
3	KALAISELVI	IV	75	32	PRIMI	24.2	10.5	GDM	-	PT	S	LN			1.8	8	yes/PT		10
4	VIJAYALAKSHMI	III	128	24	PRIMI	23.6	12	-	-	T	G	VA			2.9	8			4
5	BRINDHA	IV	176	24	PRIMI	18	12.6	-	-	T	S	LN			2.3	7			3
6	GRACE SHAKILA	III	165	20	G2P1L1	22.8	10.5	-	-	T	G	LN			3	9			4
7	RESHMA	III	187	24	PRIMI	31.5	9.4	-	-	T	S	LN			3	8			4
8	CATHERINE	IV	116	29	PRIMI	26.5	12	-	GHT	T	G	OU			3.1	8			5
9	REVATHY BAI	IV	159	26	PRIMI	24.2	13.6	-	GHT	T	G	LN			2.6	7			4
10	MADHINI	III	216	27	PRIMI	23.6	10	-	-	T	S	LN			2.8	8			4

11	REETA	IV	254	23	G2P1L1	27.2	12.5	-	-	T	S	LN			2.6	9			4
12	EPSY BEULA	III	302	22	G2P1L1	24.2	13.5	-	-	PD	G	LSCS	FI		2.7	8			8
13	BRINDHA	II	387	24	PRIMI	17.4	10	-	-	T	S	LN			2.5	9			5
14	LATHA	III	250	21	G2A1	23.4	11.4	-	-	T	S	LN			2.6	8			3
15	BHARATHI	IV	364	26	PRIMI	22.6	13.4	-	-	T	S	LN			2.5	8			3
16	VELANKANNI	IV	329	19	G2P1L1	23.4	12	-	-	T	S	LN			2.4	8			3
17	ALAMELU	IV	422	22	G2P1L1	17.9	11	-	-	T	S	LN			2.4	9			4
18	MUTHUSELVI	III	464	20	PRIMI	28.4	14.5	-	Mild	T	G	LSCS	FD		3.1	9			10
19	MAHALAKSHMI	IV	493	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	8			3
20	ESTHER CLARA	III	506	26	G2P1L1	32.4	9.2	-	GHT	T	G	LSCS	FI		3.1	9			8
21	SARANYA	IV	535	21	G2P1L1	23.6	12.8	-	-	T	S	LN			2.6	8			4
22	ANU PRIYA	V	582	25	G2P1L1	18	9	-	-	T	S	LN			2.4	8			4
23	KAVITHA	III	596	27	G2A1	24.1	10.6		-	PT	S	LN			2	8	yes/PT		5
24	VISALATCHI	IV	672	29	G2P1L1	23.8	12.4	GDM	Mild	T	G	LSCS	FD		3	9	yes/IDM		11
25	SHOBANA	II	643	20	G2P1L1	18.2	10	-	-	T	S	LN			2.3	8			4
26	LAVANYA	III	798	22	PRIMI	22.4	10.5	-	-	T	S	LN			2.9	8			4
27	BARGAVI	III	736	29	PRIMI	27.2	15.5		-	T	S	LN		PPH	3.1	8			5
28	KALAIARASI	IV	779	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		4.1	8	yes/IDM	yes	15
29	MALINI	III	806	23	PRIMI	23.6	11.6	-	-	PD	G	OU			3.1	9			3
30	NANCY RANI	IV	834	27	PRIMI	32.4	12	GDM	Mild	T	ELEC	LSCS	CPD		3.6	8	yes/IDM	YES	16
31	SUGANYA	III	869	22	G2P1L1	24.1	14.6	-	-	T	S	LN			2.8	8			4
32	LALITHA	III	932	33	PRIMI	22.6	10.6	-	-	T	S	LN			2.7	8			3
33	KOTEESHWARI	IV	956	20	PRIMI	18.1	12.9	-	-	T	G	LN			2.4	8			3
34	GIRIJA	IV	998	26	G2P1L1	29	12	-	-	T	S	VA			3.4	9			4
35	VANAJA	III	991	23	PRIMI	28.4	10.6	-	-	T	S	LN			2.9	9			3

36	SARAVANALAKSHMI	IV	1002	19	PRIMI	18	13.5	-	-	T	G	OU			2.5	8			3
37	ASHA	III	1016	30	G2P1L1	27.2	11.7	-	-	T	G	OU			3.2	7	yes/RD		4
38	PONLAKSHMI	II	1012	27	G3A2	28.4	12.5	-	-	T	S	LN		Pi	3.3	8			3
39	RAGAVENI	III	1032	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	9			4
40	PUNITHA	IV	1154	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3
41	SABITHA	IV	1172	29	G2P1L1	28.4	10	-	-	PD	G	LSCS	FI		2.9	9			10
42	ASHIRVATHAM	IV	1178	29	G2P1L1	27.2	8.5	-	-	T	S	LN			2.1	8	yes/PT		13
43	PARVEEN BANU	III	1267	25	PRIMI	23.4	13	-	-	T	S	LN			2.4	8			4
44	MALLIGA	IV	1243	25	PRIMI	22.8	12	-	-	T	S	LN			2.6	8			3
45	KARTHIGA	III	1312	24	PRIMI	24.6	12.6	-	-	T	S	LN			2.9	9			3
46	GOMATHY	IV	1394	25	PRIMI	24.4	12	-	-	T	S	LN			2.9	8			3
47	SABEENA	V	1402	21	PRIMI	26.4	8.5	-	-	T	S	LN			3.3	9			4
48	PRARTHANA	III	1467	34	G2P1L1	27.2	9.5	-	-	T	S	LN			2.9	8			4
49	SARADHADEVI	IV	1490	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	CP		2.8	7	yes/RD		9
50	SHANTHI	II	1522	30	PRIMI	23.1	12.3	-	-	T	S	LN			2.6	8			3
51	CHITRA	III	1586	24	G2A1	24.2	10.5	-	-	T	S	LSCS	CPD		3.2	9			4
52	AARTHI	III	1590	33	PRIMI	27	10	-	-	T	S	LN			2.8	8			3
53	SUBASHINI	IV	1621	19	G2P1L1	17.9	14.6	-	-	T	S	LSCS	FD		2.9	7			8
54	JEEVA	III	1643	31	G2A1	23.4	12.5	-	-	T	S	LN			2.8	8			4
55	PENICILLAMA	IV	1678	25	PRIMI	21.5	10.6	-	GHT	T	S	LN			2.7	9			3
56	NIVETHA	III	1698	20	PRIMI	17.8	10.5	-	-	T	G	LN			2.4	9			4
57	MEHRA BANU	III	1742	29	G2P1L1	32.4	13.6	GDM	-	T	S	OU		PPH	3.8	8	YSE/IDM		10
58	KASALI FATHIMA	IV	1710	23	PRIMI	22.8	13.7	-	-	T	S	LN			2.7	8			3
59	RENUKA	IV	1778	29	G2P1L1	28.2	15.6		-	PT	S	LN			2.2	7	yes/PT		6
60	KALA	III	1784	28	PRIMI	27	10	-	-	PD	G	LSCS	FI		3.1	7			8

61	JAYA	IV	1867	30	G2P1L1	26.4	10	-	-	T	S	LN			2.8	9			4
62	KAJABEE	III	1843	28	PRIMI	24.4	14.3	-	Ecl	PT	G	LN			2.1	6	yes/RD	yes	14
63	SARADA	II	1870	21	G2A1	18	12.6	-	-	T	S	LN			2.4	7			3
64	TAMILSELVI	III	1922	27	G3P1L1A1	24.4	14	-	-	T	S	LN			2.6	8			3
65	SUMALATHA	IV	1964	20	PRIMI	18.4	10.7	-	-	T	S	LN			2.2	8			4
66	SUBHA	IV	1975	31	PRIMI	31.5	9.4	GDM	Sev	T	G	OU			3.1	8			9
67	SRIPRIYA	IV	1997	33	G2P1L1	32.3	14.5	-	GHT	T	S	LN			2.9	9			4
68	MANJU	III	2032	34	PRIMI	26.4	12.4	GDM	GHT	T	S	LSCS	CPD		3.6	8			10
69	NARMADA	IV	2058	31	PRIMI	27.5	10	-	-	T	S	LN			2.9	9			4
70	MEENAKUMARI	III	2075	30	G2P1L1	28.4	8	-	-	T	S	LN			3.1	7			3
71	VINOLI	IV	2092	21	PRIMI	18.2	12.8	-	-	T	S	LN			2.5	9			4
72	PRAMILA	V	2103	24	G2A1	34.2	12	-	-	T	S	LSCS	CPD		4.1	8	YES/MAC		8
73	NAGARANI	III	2137	22	PRIMI	22.4	15.7	-	-	T	S	OU			3.1	8			4
74	THIRUVENI	IV	2169	22	G2P1L1	21.6	16.5	-	-	T	S	LN			2.8	9			3
75	HATHIJA	II	2209	20	PRIMI	18	8	-	-	PT	S	LN			1.7	7			10
76	UMARANI	III	2242	26	G2P1L1	29	15.4	-	Sev	PT	G	LSCS	FD		2.1	7	yes/PT	yes	15
77	POTHUPONNU	III	2285	27	G2P1L1	26.4	10.4	-	-	T	S	LN			3.1	8			4
78	AMUDHA	IV	2293	21	G2A1	23.4	12	-	-	T	S	LN			2.9	9			3
79	MANGALAM	III	2356	25	G2A1	28.2	8	-	Mild	T	S	VAC		RP	3.3	9			4
80	NAMITHA	IV	2387	26	G3P2L2	22.5	10	-	-	T	S	LN			2.9	8			3
81	SASIKALA	III	2412	26	PRIMI	33.3	12.2	GDM	-	T	ELEC	LSCS	CPD		4.3	9	YES/IDM		9
82	SUMALATHA	III	2450	23	G2P1L1	24.4	14.5	-	Mild	T	G	LN			2.8	8			4
83	SHERIN	IV	2487	22	PRIMI	24.2	12.6	-	-	T	S	LN			2.5	9			3
84	SEETHALAKSHMI	IV	2562	26	PRIMI	29.4	12.5	-	-	T	S	LN			2.8	8			3
85	SUJATHA	III	2590	24	G2P1L1	18	10.6	-	-	T	S	LN			2.5	8			4

86	SUNITHA	IV	2623	28	G2P1L1	23.6	13.4	-	-	T	S	LN			2.7	8			4
87	SINDHU	III	2646	29	G2P1L1	28.2	10.5	-	-	T	S	LN			3.6	9			4
88	SIVAGAMI	II	2753	27	PRIMI	28	12.4	-	-	T	S	LN			2.6	8			4
89	INDHU	III	2790	29	G2P1L1	24.4	16.5	-	-	T	S	LN		PPH	2.9	9			4
90	BANUMATHI	IV	2812	26	G2P1L1	27.2	10	-	-	T	S	LN			2.8	8			4
91	SUMANNA	IV	2860	20	PRIMI	17.9	8.6	-	-	PT	S	LN			1.9	7	YES/PT		6
92	NIRMALA	IV	2892	22	G2P1L1	22.6	14	-	-	T	S	LN			2.5	8			4
93	SEETHAMANI	III	2934	24	PRIMI	26.4	12	-	Ecl	T	G	LSCS	FI		2.4	7	yes/RD		10
94	DIVYA	IV	2987	18	G2A1	21.8	10.5	-	-	T	S	LSCS	FD		3.2	6	yes/MAS		9
95	SRIKALA	III	2976	30	G2A1	29.4	15.5	-	-	T	S	LN			2.8	9			3
96	MEGALA	IV	2990	19	G2A1	24.1	8.5	-	-	T	S	LSCS	CPD		3.1	8			8
97	MANOHARI	V	3006	22	PRIMI	26.8	12.6	-	-	PD	G	LN			2.9	8			3
98	SAKTHI	III	3064	21	PRIMI	27.2	15	-	-	T	S	LSCS	FD		3	8		yes	14
99	SRIKALA	IV	3076	23	G2P1L1	28.4	10.5	-	-	T	S	OU			3.3	8			4
100	DHAVAMATHI	II	3043	28	G2P1L1	23.2	10	-	-	T	S	OU			3.1	9			3
101	MALATHY	III	3090	24	G2A1	24.2	10.5	-	Mild	PT	G	LN			2.1	6	YES/PT	YES	15
102	KANCHANA	III	3118	33	PRIMI	27	10.7	-	-	T	S	LN			2.9	8			5
103	VASANTHI	IV	3173	19	G2P1L1	17.9	8.2	-	-	T	S	LN			2.3	9			4
104	SURYAKALA	III	3206	31	G2A1	23.4	12.4	-	-	T	S	LN			2.7	8			4
105	BATHMAVATHY	IV	3257	25	PRIMI	21.5	10.5	-	-	T	S	LSCS	FD		2.8	7	YES/MAS		8
106	REVATHI	III	3290	20	PRIMI	17.8	10.6	-	-	T	S	LN			2.4	8			3
107	AMMU	III	3375	29	G2P1L1	35.3	9.6	-	-	T	S	LN			3.5	9			4
108	SANAA	IV	3332	23	PRIMI	22.8	13	-	-	T	S	OU			3.1	8			4
109	SUDHA	IV	3423	29	G2P1L1	28.2	15.5	-	-	T	S	LN			2.9	9			3
110	VAIJAYANTHI	III	3487	28	PRIMI	27	10.4	-	-	T	S	LN			3.2	7			4

111	DEVI PRIYA	IV	3534	30	G2P1L1	26.4	10	-	-	T	S	LN			3.1	8			4
112	GRACY	III	3567	28	PRIMI	24.4	14.5	-	-	T	S	LN			2.5	7			3
113	JENIFER	II	3612	21	G2A1	18	12	-	-	T	S	LN			2.4	7			4
114	SHANTHA	III	3670	27	G3P1L1A1	24.4	14.6	-	-	T	S	LN			2.9	8			3
115	PARVEEN SULTHANA	IV	3698	20	PRIMI	18.4	10.6	-	-	T	S	LN			2.5	8			4
116	NALEENA	IV	3754	31	G2P1L1	29	15.6	GDM	-	T	ELEC	LSCS	CPD		3.8	9	YES/IDM	YES	15
117	RANI	IV	3794	33	PRIMI	34.2	12	-	Sev	PT	G	LN			2.1	7	YES/PT		9
118	KAVITHA	III	3854	34	PRIMI	26.4	12.7	-	-	T	S	LN			3.1	9			4
119	MANGAI	IV	3896	31	PRIMI	27.5	10.2	-	-	PD	G	LSCS	FI		3.1	8			8
120	JAYASHEELI	III	3923	30	G2P1L1	28.4	15.8	-	ECL	T	G	LSCS	FD		2.4	7	YES/RD		16
121	NANDHINI	IV	4012	21	PRIMI	18.2	12	-	-	T	S	LN			2.3	8			3
122	AGILANDAM	V	4056	24	G2P1L1	32.1	10.5	GDM	-	T	S	VAC			3.6	9			5
123	SOWMIYA	III	4145	22	PRIMI	22.4	15.2	-	-	T	S	LN		PPH	2.7	7			5
124	INDHU	IV	4290	22	G2P1L1	21.6	16	-	-	T	S	LSCS			2.9	8			4
125	BALAKUMARI	II	4376	20	PRIMI	18	8.4	-	-	PT	S	LN			1.9	7	YES/PT		6
126	RAMANI	III	4399	26	PRIMI	30.3	8.5		-	T	S	LN			3.1	7			4
127	KOKILA	III	4412	27	G2P1L1	26.4	10.3	-	SEV	T	S	LN			2.8	8			5
128	PAPPITHA	IV	4490	21	G2A1	23.4	12	-	-	T	S	OU			2.6	9			4
129	JANAKI	III	4578	25	G2A1	28.2	8.4	-	-	T	S	LN			3.3	8			3
130	VALARMATHY	IV	4597	26	G3P2L2	22.5	10.2	-	-	T	S	LN			2.8	9			4
131	VINEETHA	III	4623	26	G2P1L1	31.3	11	-	Mild	T	S	OU			3.1	8			5
132	PRAVEENA	III	4723	23	G2P1L1	24.4	14	-	-	T	S	LN			3	8			4
133	MARYAMBEE	IV	4795	22	PRIMI	24.2	12.4	-	-	T	S	LN			2.5	8			4
134	DEVIKA	IV	4823	26	PRIMI	29.4	12.6	GDM	-	T	S	OU		PPH	3.7	9			8
135	GUNASUNDARI	III	4890	24	G2P1L1	18	10.2	-	GHT	T	G	LN			2.4	8		-	8

136	GLORY	IV	4934	28	G2P1L1	23.6	13.2	-	-	T	S	LN			2.6	8			4
137	MEHAROON	III	4997	29	G2P1L1	28.2	10	-	-	T	S	LN			2.9	9			3
138	LAKSHMI	II	5034	27	PRIMI	28	12.4	-	-	T	S	LN			3.1	7			3
139	KANCHANA	III	5078	29	G2P1L1	24.4	16.7	GDM	-	T	S	LN			3.2	9			5
140	JAWAANA	IV	5188	26	G2P1L1	27.2	10	-	-	T	S	LN			2.7	5			3
141	KUMUDHA	IV	5278	20	PRIMI	17.9	8	-	-	T	S	LSCS	FD		2.6	9			8
142	SHAMEEM BANU	IV	5388	22	G2P1L1	22.6	14.6	-	Mild	T	G	LN			2.8	8			5
143	REKHA	III	5395	24	PRIMI	26.4	12	-	-	T	S	LN			2.8	9			4
144	SOPHIA	IV	5418	18	G2A1	21.8	10.6	-	-	T	S	LN			2.9	9			3
145	VALLI RANI	III	5476	30	G2A1	29.4	15	-	GHT	T	S	VAC			3.3	9			4
146	EMELI	IV	5512	19	G2A1	24.1	8.2	-	-	T	S	LN			2.8	8			3
147	SRIBALAMBIKA	V	5578	22	PRIMI	26.8	12.5	-	-	PT	S	LN			1.9	7	YES/PT		10
148	THANGAM	III	5598	21	PRIMI	27.2	15.3	-	-	T	S	LN			3.1	9			3
149	SIVASHANKARI	IV	5665	23	G2P1L1	28.4	10.1	-	SEV	PT	G	LSCS	FI		2.1	7	YES/PT	YES	17
150	REGINA	II	5689	28	G2P1L1	23.2	15.5	-	-	T	S	LN			2.8	8			4
151	NOOR NISHA	III	5713	18	PRIMI	23.2	10.8	-	-	T	S	LN			2.8	8			3
152	SUBBULAKSHMI	III	5730	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	9			4
153	BHAVANI	IV	5798	30	G3P2L2	31.2	10.6	GDM	-	PT	S	LN			2.1	7	YES/PT		6
154	KAVITHENDRAL	III	6065	24	PRIMI	23.6	12.4	-	Mild	T	G	VA			2.9	8			4
155	ANGAMMAL	IV	6087	24	PRIMI	18	12.2	-	-	T	S	LN			2.3	7			3
156	DHANAM	III	6091	20	G2P1L1	22.8	10.3	-	-	T	G	LN			3	9			4
157	LAKSHMIPRIYA	III	6172	32	PRIMI	24.2	10	-	-	PT	S	LN			1.8	8	yes/PT		10
158	FAREETHA BEGUM	IV	6149	29	PRIMI	26.5	12.2	-	-	T	S	LN			3.1	8			5
159	SARITHA	IV	6189	26	PRIMI	24.2	13.4	-	-	T	G	LN			2.6	7			4
160	DEVIKA	III	6233	27	PRIMI	23.6	10.5	-	-	T	S	LN			2.8	8			4

161	JANAKI	IV	6276	23	G2P1L1	27.2	12.5	-	SEV	T	G	LN		PPH	2.6	9			6
162	REENA	III	6299	22	G2P1L1	24.2	13.4	-	-	PD	G	LN			2.7	8			8
163	POONGULAZHI	II	6317	24	PRIMI	17.4	10.2	-	-	T	S	LN			2.5	9			5
164	JAYARANI	III	6346	21	G2A1	23.4	11.3	-	-	T	S	LSCS	FD		2.6	8			3
165	DHARASELVI	IV	6387	26	PRIMI	22.6	13.3	-	-	T	S	VAC			2.5	8			3
166	SOUNDHARYA	IV	6478	19	G2P1L1	23.4	12	GDM	-	T	S	LN			3.4	8			3
167	SATHYA	IV	6490	22	G2P1L1	17.9	11.3	-	-	T	S	LN			2.4	9			4
168	ANBARASI	III	6488	20	PRIMI	28.4	14.2	-	-	T	G	LSCS	FD		3.1	9			10
169	LAVANYA	IV	6523	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	8			3
170	ANURADHA	III	6537	26	G2P1L1	32.1	9.5	GDM		T	ELEC	LSCS	CPD		4.2	9			10
171	SHARMILA	IV	6577	21	G2P1L1	23.6	12.2	-	GHT	T	G	LN			2.6	8			4
172	RAMALAKSHMI	V	6624	25	G2P1L1	18	9	-	-	T	S	LN			2.4	8			4
173	DESA RANI	III	6658	27	G2A1	24.1	10.2	-	-	PT	S	LN			1.9	8	yes/PT		5
174	ARCHANA	IV	6680	29	G2P1L1	23.8	12.2	-	Mild	T	G	LSCS	FI		3	9			11
175	SUBASHINI	II	6754	20	G2P1L1	18.2	10.5	-	-	T	S	LN			2.3	8			4
176	AMBIKA	III	6730	22	PRIMI	22.4	10	GDM	-	T	S	LN			3.5	8	YES/IDM		4
177	MURUGALAKSHMI	III	6799	29	PRIMI	27.2	15.5		-	T	S	OU			3.1	8			5
178	ARABI	IV	6854	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		4.1	8	yes/IDM	yes	15
179	SUBBAMMAL	III	6878	23	PRIMI	23.6	11.4	-	-	T	S	LN			3.1	9			3
180	SITHARA	IV	6896	27	PRIMI	32.1	10	-	-	PD	G	LSCS	FI		3.1	9			8
181	SHEEBA	III	6932	22	G2P1L1	24.1	14.3	-	-	T	S	LN			2.8	8			4
182	KIRUTHIGA	III	6984	33	PRIMI	22.6	10.2	-	-	T	S	LN			2.7	8			3
183	SILAMBARASI	IV	7023	20	PRIMI	18.1	12.4	-	-	T	G	LN			2.4	8			3
184	DURGA	IV	7056	26	G2P1L1	29	12.5	-	-	T	S	VA		RP	3.4	9			4
185	ANITHA	III	7044	23	PRIMI	28.4	10	-	-	T	S	LN			2.9	9	YES/RD		3

186	POORANI	IV	7068	19	PRIMI	18	13.4	-	-	T	G	OU			2.5	8			3
187	SHAKIRA BANU	III	7112	30	G2P1L1	27.2	11	-	-	PD	G	OU			3.2	7			4
188	RAASATHI	II	7179	27	G3A2	28.4	12.4	-	-	T	S	LN		PI	3.3	8			3
189	SADHANA	III	7167	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	9			4
190	MANGAYARKARASI	IV	7150	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3
191	KUMARI	IV	7245	29	G2P1L1	28.4	10	-	-	T	G	LSCS	FI		2.9	9			10
192	SEETHALAKSHMI	IV	7298	29	G2P1L1	27.2	8.5	-	-	PT	S	LN			2.1	8	yes/PT		13
193	NALINI	III	7287	25	PRIMI	23.4	13.4	-	-	T	S	LN			2.4	8			4
194	KUMUDHA	IV	7337	25	PRIMI	22.8	12.5	-	-	T	S	LN			2.6	8			3
195	KAYALVIZHI	III	7370	24	PRIMI	24.6	12.4	-	-	PD	GI	LN			2.9	9			3
196	TAJ BEGHAM	IV	7378	25	PRIMI	24.4	12.4	-	-	T	S	LN			2.9	8			3
197	JANNATH	V	7423	21	PRIMI	26.4	8	-	-	T	S	LN		Pi	3.3	9			4
198	UMA	III	7476	34	G2P1L1	27.2	9.4	-	-	T	S	LN			2.9	8			4
199	MAGESHWARI	IV	7498	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	OLIGO		2.8	7	yes/RD		9
200	FATHIMA BEGUM	II	7522	30	PRIMI	23.1	12	-	-	T	S	LN			2.6	8			3
201	POORNIMA	III	7539	18	PRIMI	23.2	10.4	-	-	T	S	LN			2.8	8			3
202	GOMATHY	III	7582	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	9			4
203	SANGEETHA	IV	7686	32	PRIMI	24.2	10.5	GDM	-	PT	S	LN			1.8	8	YES/PT		10
204	GAYATHRI	III	7659	24	PRIMI	23.6	12	-	-	T	G	VA			2.9	8			4
205	PREMA	IV	7697	24	PRIMI	18	12.6	-	-	T	S	LN			2.3	7			3
206	ANANDHI	III	7689	20	G2P1L1	22.8	10.5	-	-	T	G	LN			3	9			4
207	SHERIFFA	III	7734	26	G2A1	30.6	9.4	GDM	-	T	S	LN			3.6	8			5
208	BANUPRIYA	IV	7778	29	PRIMI	26.5	12	-	GHT	T	G	OU			3.1	8			5
209	SUGANYA	IV	7786	26	PRIMI	24.2	13.6	-	GHT	T	G	LN			2.6	7			4
210	VAHITHA	III	7823	27	PRIMI	23.6	10	-	-	T	S	LN			2.8	8			4

211	AMUTHA	IV	7859	23	G2P1L1	27.2	12.5	-	-	T	S	LN			2.6	9			4
212	RAMYA	III	7898	22	G2P1L1	24.2	13.5	-	-	PD	G	LSCS	FI		2.7	8			8
213	FATHIMA	II	7866	24	PRIMI	17.4	10	-	-	T	S	LN			2.5	9			5
214	HEMALATHA	III	7943	21	G2A1	23.4	11.4	-	-	T	S	LN			2.6	8			3
215	JAYALAKSHMI	IV	7968	26	PRIMI	22.6	13.4	-	-	T	S	LN			2.5	8			3
216	PUSHPALATHA	IV	7988	19	G2P1L1	23.4	12	-	-	T	S	LN			2.4	8			3
217	SARANYA	IV	7970	22	G2P1L1	17.9	11	-	-	T	S	LN			2.4	9			4
218	SHANTHINI	III	8006	20	PRIMI	28.4	14.5	-	Mild	T	G	LSCS	FD		3.1	9			10
219	AMMU SHANTHI	IV	8045	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	8			3
220	MANJULA	III	8069	26	G2P1L1	31.5	9.2	-	GHT	T	S	VAC			3.1	7			5
221	SARASU	IV	8087	21	G2P1L1	23.6	12.8	-	-	T	S	LN			2.6	8			4
222	SARITHA	V	8096	25	G2P1L1	18	9	-	-	T	S	LN			2.4	8			4
223	MUTHARASI	III	8165	27	G2A1	24.1	10.6		-	PT	S	LN			2	8	yes/PT		5
224	JULIA	IV	8176	29	G2P1L1	23.8	12.4	GDM	Mild	T	G	LSCS	FD		3	9	yes/IDM		11
225	SWATHY	II	8199	20	G2P1L1	18.2	10	-	-	T	S	LN			2.3	8			4
226	ALKA	III	8212	22	PRIMI	22.4	10.5	-	-	T	S	LN			2.9	8			4
227	BHAVANI	III	8245	29	PRIMI	27.2	15.5		-	T	S	LN			3.1	8			5
228	REKHA	IV	8279	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		3.5	8		yes	15
229	USHA	III	8290	23	PRIMI	23.6	11.6	-	-	PD	G	VAC			3.1	9			3
230	SASIKALA	IV	8312	27	PRIMI	31.4	12	-	Mild	PT	S	LN			2	8	YES/PT		4
231	DEVI	III	8324	22	G2P1L1	24.1	14.6	-	-	T	S	LN			2.8	8			4
232	SHAMINI	III	8364	33	PRIMI	22.6	10.6	-	-	T	S	LN			2.7	8			3
233	BANUPRIYA	IV	8395	20	PRIMI	18.1	12.9	-	-	T	G	LN			2.4	8			3
234	SURYAKALA	IV	8423	26	G2P1L1	29	12	-	-	T	S	VA			3.4	9			4
235	GOWTHAMI	III	8467	23	PRIMI	28.4	10.6	-	-	T	S	LN			2.9	9			3

236	DURGA DEVI	IV	8497	19	PRIMI	18	13.5	-	-	T	G	OU			2.5	8			3
237	EZHILARASI	III	8558	30	G2P1L1	27.2	11.7	-	-	T	G	OU			3.2	7			4
238	KUMARI	II	8534	27	G3A2	28.4	12.5	-	-	T	S	LN			3.3	8			3
239	MAHALAKSHMI	III	8597	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	9			4
240	SANDHYA	IV	8623	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3
241	REVATHI	IV	8630	29	G2P1L1	28.4	10	-	-	PD	G	LSCS	FI		2.9	9			10
242	GOMATHY	IV	8687	29	G2P1L1	27.2	8.5	-	-	T	S	LN			2.1	8	yes/PT		13
243	MANIMEGALAI	III	8680	25	PRIMI	23.4	13	-	-	T	S	LN			2.4	8			4
244	DURGA	IV	8749	25	PRIMI	22.8	12	-	-	T	S	LN			2.6	8			3
245	SHEELA	III	8798	24	PRIMI	24.6	12.6	-	-	T	S	LN			2.9	9			3
246	DHANALAKSHMI	IV	8745	25	PRIMI	24.4	12	-	-	T	S	LN			2.9	8			3
247	MALATHY	V	8777	21	PRIMI	26.4	8.5	-	-	T	S	LN			3.3	9			4
248	MERAJ BANU	III	8803	34	G2P1L1	27.2	9.5	-	-	T	S	LN			2.9	8			4
249	JAYALAKSHMI	IV	8862	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	FD		2.8	7	yes/RD		9
250	MAHESHWARI	II	8819	30	PRIMI	23.1	12.3	-	-	T	S	LN			2.6	8			3
251	MANJULA	III	8898	24	G2A1	24.2	10.5	-	-	T	S	LSCS	CPD		3.2	9			4
252	SHANTHI	III	8955	33	PRIMI	27	10	-	-	T	S	LN			2.8	8			3
253	BHEENA	IV	8927	19	G2P1L1	17.9	14.6	-	-	T	S	LSCS	FD		2.9	7			8
254	DHIVYA	III	8990	31	G2A1	23.4	12.5	-	-	T	S	LN			2.8	8			4
255	LAKSHMI	IV	9012	25	PRIMI	21.5	10.6	-	GHT	T	S	LN			2.7	9			3
256	GOMATHY	III	9043	20	PRIMI	17.8	10.5	-	-	T	G	LN			2.4	9			4
257	INDHUMATHY	III	9057	29	G2P1L1	31.5	13.6	GDM	-	PT	S	LN			1.9		YES/PT		6
258	JAYAPRIYA	IV	9088	23	PRIMI	22.8	13.7	-	-	T	S	LN			2.7	8			3
259	MAHALAKSHMI	IV	9144	29	G2P1L1	28.2	15.6		-	PT	S	LN			2.2	7	yes/PT		6
260	VENKATAMMAL	III	9156	28	PRIMI	27	10	-	-	PD	G	LSCS	FI		3.1	7			8

261	VIJAYA	IV	9189	30	G2P1L1	26.4	10	-	-	T	S	LN			2.8	9			4
262	SUGANYA	III	9233	28	PRIMI	24.4	14.3	-	Ecl	PT	G	LN			2.1	6	yes/RD	yes	14
263	RAJALAKSHMI	II	9267	21	G2A1	18	12.6	-	-	T	S	LN			2.4	7			3
264	JESINTHA MANI	III	9296	27	G3P1L1A1	24.4	14	-	-	T	S	LN			2.6	8			3
265	HARIKALA	IV	9255	20	PRIMI	18.4	10.7	-	-	T	S	LN			2.2	8			4
266	AMUL RANI	IV	9367	31	G3P2L2	32.1	9.4	-	-	PD	G	LN			2.9				5
267	VISUVASAMMA	IV	9376	33	G2A1	30	14.5	-	ECL	T	G	LSCS	FD		2.1	7	YES/IUGR		16
268	GAJALAKSHMI	III	9399	34	PRIMI	26.4	12.4	GDM	GHT	T	S	LSCS	CPD		3.6	8			10
269	MANJU MALA	IV	9367	31	PRIMI	27.5	10	-	-	T	S	LN			2.9	9			4
270	JANSI	III	9411	30	G2P1L1	28.4	8	-	-	T	S	LN			3.1	7			3
271	AJJETHA	IV	9466	21	PRIMI	18.2	12.8	-	-	T	S	LN			2.5	9			4
272	MADHUMITHA	V	9477	24	PRIMI	31.1	12	-	Mild	T	S	VAC			3.5	8			6
273	JASMINE	III	9549	22	PRIMI	22.4	15.7	-	-	T	S	OU			3.1	8			4
274	MEERA	IV	9537	22	G2P1L1	21.6	16.5	-	-	T	S	LN			2.8	9			3
275	SNEHA	II	9588	20	PRIMI	18	8	-	-	PT	S	LN			1.7	7			10
276	LALITHA	III	9687	26	G2P1L1	29	15.4	-	Sev	PT	G	LSCS	FD		2.1	7	yes/PT	yes	15
277	VARSHA	III	9638	27	G2P1L1	26.4	10.4	-	-	T	S	LN			3.1	8			4
278	SARADHADEVI	IV	9690	21	G2A1	23.4	12	-	-	T	S	LN			2.9	9			3
279	PRADEEPA	III	9736	25	G2A1	28.2	8	-	Mild	T	S	VAC			3.3	9			4
280	PRINCY	IV	9773	26	G3P2L2	22.5	10	-	-	T	S	LN			2.9	8			3
281	SANDHYA	III	9786	26	PRIMI	32.1	12.2	-	-	PD	S	VAC			3.3	7			4
282	MENAKA	III	9820	23	G2P1L1	24.4	14.5	-	Mild	T	G	LN			2.8	8			4
283	PREMA	IV	9878	22	PRIMI	24.2	12.6	-	-	T	S	LN			2.5	9			3
284	RAJI	IV	9866	26	PRIMI	29.4	12.5	-	-	T	S	LN			2.8	8			3
285	SHEELA	III	9870	24	G2P1L1	18	10.6	-	-	T	S	LN			2.5	8			4

286	SUREKHA	IV	9918	28	G2P1L1	23.6	13.4	-	-	T	S	LN			2.7	8			4
287	JAYASHREE	III	9920	29	G2P1L1	28.2	10.5	-	-	T	S	LN			3.6	9			4
288	SUNDHARI	II	9978	27	PRIMI	28	12.4	-	-	T	S	LN			2.6	8			4
289	ABITHA	III	1003	29	G2P1L1	24.4	16.5	-	-	T	S	LN			2.9	9			4
290	GOMATHY	IV	1056	26	G2P1L1	27.2	10	-	-	T	ELEC	LSCS	CPD		3.8	8			4
291	UMA RANI	IV	1098	20	PRIMI	17.9	8.6	-	-	PT	S	LN			1.9	7			6
292	YAMUNA	IV	1154	22	G2P1L1	22.6	14	-	-	T	S	LN			2.5	8			4
293	KARKUZHALI	III	1169	24	PRIMI	26.4	12	-	Ecl	T	G	LSCS	FD		2.4	7	yes/RD		10
294	INDHU PRIYA	IV	1197	18	G2A1	21.8	10.5	-	-	T	S	LSCS	FD		3.2	6	yes/MAS		9
295	DEEPIKA	III	1245	30	G2A1	29.4	15.5	-	-	T	S	LN			2.8	9			3
296	SHARMILA	IV	1276	19	G2A1	24.1	8.5	-	-	T	S	LSCS	CPD		3.1	8			8
297	SUBHASHREE	V	1297	22	PRIMI	26.8	12.6	-	-	PD	G	LN			2.9	8			3
298	YASODHA	III	1321	21	PRIMI	27.2	15	-	-	T	S	LSCS	FD		3	8		yes	14
299	SARA	IV	1387	23	G2P1L1	28.4	10.5	-	-	T	S	OU			3.3	8			4
300	DHEIVANAI	II	1398	28	G2P1L1	23.2	10	-	-	T	S	OU			3.1	9			3
301	HEPSIBA	III	1344	24	G2A1	24.2	10.5	-	Mild	PT	GI	LN			2.1	6	YES/PT	YES	15
302	SASIKALA	III	1498	33	PRIMI	27	10.7	-	-	T	S	LN			2.9	8			5
303	KAMALA	IV	1445	19	G2P1L1	17.9	8.2	-	-	T	S	LN			2.3	9			4
304	PRIYADHARSHINI	III	1434	31	G2A1	23.4	12.4	-	-	T	S	LN			2.7	8			4
305	INDRA	IV	1512	25	PRIMI	21.5	10.5	-	-	T	S	LSCS	FD		2.8	7	YES/MAS		8
306	MARY	III	1587	20	PRIMI	17.8	10.6	-	-	T	S	LN			2.4	8			4
307	INDHUMATHI	III	1580	29	G2P1L1	30.5	10.7	-	Sev	T	G	LSCS	FI		2.9	9			10
308	DILSHATH BEGUM	IV	1623	23	PRIMI	22.8	13	-	-	T	S	OU			3.1	8			4
309	PRABHA	IV	1678	29	G2P1L1	28.2	15.5	-	-	T	S	LN			2.9	9			3
310	SANGEETHA	III	1699	28	PRIMI	27	10.4	-	-	T	S	LN			3.2	7			4

311	AMALYA	IV	1716	30	G2P1L1	26.4	10	-	-	T	S	LN			3.1	8			4
312	NALINI	III	1756	28	PRIMI	24.4	14.5	-	-	T	S	LN			2.5	7			3
313	VANITHA	II	1790	21	G2A1	18	12	-	-	T	S	LN			2.4	7			4
314	STELLA	III	1832	27	G3P1L1A1	24.4	14.6	-	-	T	S	LN			2.9	8			3
315	KALAVATHY	IV	1856	20	PRIMI	18.4	10.6	-	-	T	S	LN			2.5	8			4
316	ANNAPOORANI	IV	1898	31	G2P1L1	29	15	GDM	-	T	ELEC	LSCS	CPD		3.8	9	YES/IDM	YES	15
317	VASUKI	IV	1906	33	G3P2L2	30.5	9.5	-	-	PD	S	OU		RP	3.4	8			5
318	VIDHYA	III	1945	34	PRIMI	26.4	12.7	-	-	T	S	LN			3.1	9			4
319	PARVATHY	IV	1967	31	PRIMI	27.5	10.2	-	-	PD	G	LSCS	FI		3.1	8			8
320	ASHVINI	III	2023	30	G2P1L1	28.4	15.8	-	ECL	T	G	LSCS	FD		2.4	7	YES/RD		16
321	SHIFA	IV	2045	21	PRIMI	18.2	12	-	-	T	S	LN			2.3	8			3
322	PRAVEENA	V	2076	24	G2P1L1	30.6	11	-	Mild	T	S	OU		PT	3.1	9			10
323	KAUSIYA	III	2145	22	PRIMI	22.4	15.2	-	-	T	S	LN		PPH	2.7	7			5
324	CHINNA PONNU	IV	2170	22	G2P1L1	21.6	16	-	-	T	S	LSCS			2.9	8			4
325	LEELA	II	2192	20	PRIMI	18	8.4	-	-	PT	S	LN			1.9	7	YES/PT		6
326	KAVERY	III	2287	27	G2P1L1	26.4	10.3	-	SEV	T	S	LN			2.8	8			5
327	GODAVARI	III	2294	21	G2A1	23.4	12	-	-	T	S	OU			2.6	9			4
328	KAMATCHI	IV	2311	25	G2A1	28.2	8.4	-	-	T	S	LN			3.3	8			3
329	ANJU	III	2387	26	G3P2L2	22.5	10.2	-	-	T	S	LN			2.8	9			4
330	PREETHI	IV	2365	26	PRIMI	30.6	8	-	-	PD	G	VAC			3.2	8			4
331	AMSAVENI	III	2495	23	G2P1L1	24.4	14	-	-	T	S	LN			3	8			4
332	MOHANA	III	2497	22	PRIMI	24.2	12.4	-	-	T	S	LN			2.5	8			4
333	PRIYANGA	IV	2437	26	PRIMI	29.4	12.6	GDM	-	T	S	OU		PPH	3.7	9			8
334	NAGAVALLI	IV	2519	24	G2P1L1	18	10.2	-	GHT	T	G	LN			2.4	8		-	8
335	AFRIN	III	2590	28	G2P1L1	23.6	13.2	-	-	T	S	LN			2.6	8			4

336	RAJESHWARI	IV	2528	29	G2P1L1	28.2	10	-	-	T	S	LN			2.9	9			3
337	SULOCHANA	III	2594	27	PRIMI	28	12.4	-	-	T	S	LN			3.1	7			3
338	DEHLI RANI	II	2696	29	G2P1L1	24.4	16.7	GDM	-	T	S	LN			3.2	9			5
339	MALAR	III	2678	26	G2P1L1	27.2	10	-	-	T	S	LN			2.7	5			3
340	USHA	IV	2623	20	PRIMI	17.9	8	-	-	T	S	LSCS	FD		2.6	9			8
341	THAARA	IV	2669	22	G2P1L1	22.6	14.6	-	Mild	T	G	LN			2.8	8			5
342	VASANTHA	IV	2734	24	PRIMI	26.4	12	-	-	T	S	LN			2.8	9			4
343	SARGUNAM	III	2716	18	G2A1	21.8	10.6	-	-	T	S	LN			2.9	9			3
344	DEVIKA	IV	2849	30	G2A1	29.4	15	-	GHT	T	S	VAC			3.3	9			4
345	KALA	III	2895	19	G2A1	24.1	8.2	-	-	T	S	LN			2.8	8			3
346	KANMANI	IV	2945	22	PRIMI	26.8	12.5	-	-	PT	S	LN			1.9	7	YES/PT		10
347	JOTHY	V	2989	21	PRIMI	27.2	15.3	-	-	T	S	LN			3.1	9			3
348	NIVETHA	III	3023	23	G2P1L1	28.4	10.1	-	SEV	PT	G	LSCS	FI		2.1	7	YES/PT	YES	17
349	SASIKUMARI	IV	3156	28	G2P1L1	23.2	15.5	-	-	T	S	LN			2.8	8			4
350	GANGA	II	3287	26	PRIMI	32.4	13.7	-	-	PD	G	LN			3	9			4
351	DEEPA	III	3220	22	G2P1L1	24.1	14.3	-	-	T	ELEC	LSCS	CPD		2.8	8			4
352	UNNAMALAI	III	3267	33	PRIMI	22.6	10.2	-	-	T	S	LN			2.7	8			3
353	YASODHA	IV	3356	20	PRIMI	18.1	12.4	-	-	T	G	LN			2.4	8			3
354	AMBIKA	III	3467	26	G2P1L1	29	12.5	-	-	T	S	VA		RP	3.4	9			4
355	VENNILA	IV	3598	23	PRIMI	28.4	10	-	-	T	ELEC	LSCS	CPD		2.9	9	YES/RD		3
356	NISHANTHI	III	3509	19	PRIMI	18	13.4	-	-	T	G	OU			2.5	8			3
357	AARTHY	III	3675	30	G2P1L1	27.2	11	-	-	PD	G	OU			3.2	7			4
358	VAISHNAVIE	IV	3690	27	G3A2	28.4	12.4	-	-	T	S	LN		PT	3.3	8			3
359	JANANI	IV	3718	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	9			4
360	SEETHA	III	3750	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3

361	SUBASHREE	IV	3769	29	G2P1L1	28.4	10	-	-	T	G	LSCS	FD		2.9	9			10
362	KARPAGAM	III	3803	29	G2P1L1	27.2	8.5	-	-	PT	S	LN			2.1	8	yes/PT		13
363	MUNIYAMMAL	II	3944	25	PRIMI	23.4	13.4	-	-	T	ELEC	LSCS	CPD		3.1	8			4
364	PANCHALI	III	3965	25	PRIMI	22.8	12.5	-	-	T	S	LN			2.6	8			3
365	KANTHA	IV	4054	24	PRIMI	24.6	12.4	-	-	PD	GI	LN			2.9	9			3
366	THENMOZHI	IV	4145	25	PRIMI	24.4	12.4	-	-	T	S	LN			2.9	8			3
367	ABITHA	IV	4187	21	PRIMI	26.4	8	-	-	T	S	LN		PT	3.3	9			4
368	VIJAYA	III	4267	34	G2P1L1	27.2	9.4	-	-	T	S	LN			2.9	8			4
369	HEMALATHA	IV	4368	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	OLIGO		2.8	7	yes/RD		9
370	PUSHPA	III	4328	30	PRIMI	23.1	12	-	-	T	S	LN			2.6	8			3
371	ARUNA	IV	4492	18	PRIMI	23.2	10	-	-	T	S	LN			2.8	8			3
372	VANAJA	V	4589	18	PRIMI	23.2	10.8	-	-	T	S	LN			2.8	8			3
373	SUGUMARI	III	4596	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	9			4
374	KASTHURI	IV	4629	24	PRIMI	32.1	9	GDM	-	T	ELEC	LSCS	CPD		4	7	YES/IDM	YES	18
375	PAVITHRA	II	4698	24	PRIMI	23.6	12.4	-	Mild	T	G	VA			2.9	8			4
376	ANUJA	III	4734	24	PRIMI	18	12.2	-	-	T	S	LN			2.3	7			3
377	AMBIKA	III	4869	20	G2P1L1	22.8	10.3	-	-	T	G	LN			3	9			4
378	PERCY	IV	4912	32	PRIMI	24.2	10	-	-	PT	S	LN			1.8	8	yes/PT		10
379	RATHNA	III	4983	29	PRIMI	26.5	12.2	-	-	T	ELEC	LSCS			3.1	8			5
380	VINNARASI	IV	5014	26	PRIMI	24.2	13.4	-	-	T	G	LN			2.6	7			4
381	VIMALA	III	5076	27	PRIMI	23.6	10.5	-	-	T	S	LN			2.8	8			4
382	MALAR MANGAI	III	5169	23	G2P1L1	27.2	12.5	-	SEV	T	G	LN		PPH	2.6	9			6
383	VIGNESHVARI	IV	5190	22	G2P1L1	24.2	13.4	-	-	PD	G	LN			2.7	8			8
384	CHRISTINA	IV	5284	24	PRIMI	17.4	10.2	-	-	T	S	LN			2.5	9			5
385	GEETHA	III	5298	21	G2A1	23.4	11.3	-	-	T	S	LSCS	FD		2.6	8			3

386	JAMUNA	IV	5310	26	PRIMI	22.6	13.3	-	-	T	S	VAC			2.5	8			3
387	SHALINI	III	5387	19	G2P1L1	23.4	12	GDM	-	T	S	LN			3.4	8			3
388	NANDHINI	II	5448	22	G2P1L1	17.9	11.3	-	-	T	S	LN			2.4	9			4
389	REVATHI	III	5520	20	PRIMI	28.4	14.2	-	-	T	G	LSCS	FD		3.1	9			10
390	PARAMESHWARI	IV	5582	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	8			3
391	SONIYA	IV	5678	30	PRIMI	34	12.6	-	ECL	T	G	OU			1.9	9	YES/IUGR		6
392	JEEVA	IV	5690	21	G2P1L1	23.6	12.2	-	GHT	T	G	LN			2.6	8			4
393	KAMINI	III	5834	25	G2P1L1	23.4	9	-	-	T	ELEC	LSCS	CPD		3.4	8			4
394	NAGORE MEERA	IV	5720	27	G2A1	24.1	10.2	-	-	PT	S	LN			1.9	8	yes/PT		5
395	SWEETY	III	5877	29	G2P1L1	23.8	12.2	-	Mild	T	G	LSCS	OLIGO		3	9			11
396	HARISHNI	IV	5929	20	G2P1L1	18.2	10.5	-	-	T	S	LN			2.3	8			4
397	AMUKU	V	6047	22	PRIMI	22.4	10	GDM	-	T	S	LN			3.5	8	YES/IDM		4
398	KAVIYA	III	6167	29	PRIMI	27.2	15.5		-	T	S	OU			3.1	8			5
399	RANJANEE	IV	6276	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		4.1	8	yes/IDM	yes	15
400	SUSEE	II	6387	23	PRIMI	23.6	11.4	-	-	T	S	LN			3.1	9			3
401	ASEENA	III	6447	27	G2P1L1	30.7	10.4	-	-	PD	G	OU			3.2	8			5
402	JAYANTHY	III	6419	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	8	yes/PT		4
403	MAYA	IV	6573	32	PRIMI	24.2	10.5	GDM	-	PT	S	LN			1.8	9			10
404	BHAVYA	III	6784	24	PRIMI	23.6	12	-	-	T	G	VA			2.9	8			4
405	YAMUNA	IV	6946	18	PRIMI	20.4	13.5			T	S	LN			2.1	8			3
406	THAMARAI	III	7012	20	G2P1L1	22.8	10.5	-	-	T	G	LN			3	7			4
407	SELVI	III	7077	24	G2A1	35.6	9.4	GDM		T	S	OU		PT	3.1	9			10
408	VANMATHY	IV	7112	29	PRIMI	26.5	12	-	GHT	T	G	OU			3.1	8			5
409	DIVYABHARATHY	IV	7193	26	PRIMI	24.2	13.6	-	GHT	T	G	LN			2.6	8			4
410	POOJA	III	7269	27	PRIMI	23.6	10	-	-	T	S	LN			2.8	7			4

411	SUBHASHREE	IV	7310	23	G2P1L1	27.2	12.5	-	-	T	S	LN			2.6	8			4
412	PRASANNA	III	7398	22	G2P1L1	24.2	13.5	-	-	PD	G	LSCS	FI		2.7	9			8
413	YAZHINI	II	7472	24	PRIMI	17.4	10	-	-	T	S	LN			2.5	8			5
414	ROSY	III	7533	21	G2A1	23.4	11.4	-	-	T	S	LN			2.6	9			3
415	IMMACULATE	IV	7605	26	PRIMI	22.6	13.4	-	-	T	S	LN			2.5	8			3
416	POONGODI	IV	7692	19	G2P1L1	23.4	12	-	-	T	S	LN			2.4	8			3
417	ASHA	IV	7702	22	G2P1L1	17.9	11	-	-	T	S	LN			2.4	8			4
418	LEELAVATHI	III	7782	20	PRIMI	28.4	14.5	-	Mild	T	G	LSCS	FD		3.1	9			10
419	KAVITHA	IV	7823	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	9			3
420	SYED ALI FATHIMA	III	7899	30	PRIMI	36	9.2		-	PD	G	LSCS	FD		3.1	8		YES	16
421	SIDEVI	IV	7973	21	G2P1L1	23.6	12.8	-	-	T	S	LN			2.6	8			4
422	TAMIL SELVI	V	8003	25	G2P1L1	18	9	-	-	T	S	LN			2.4	8			4
423	GAYATHRI	III	8078	27	G2A1	24.1	10.6		-	PT	S	LN			2	8	yes/PT		5
424	BHUVANESHVARI	IV	8117	29	G2P1L1	23.8	12.4	GDM	Mild	T	G	LSCS	FD		3	8	yes/IDM		11
425	SURYAPRIYA	II	8189	20	G2P1L1	18.2	10	-	-	T	S	LN			2.3	9			4
426	KANMANI	III	8267	22	PRIMI	22.4	10.5	-	-	T	S	LN			2.9	8			4
427	RUKHMANI	III	8359	29	PRIMI	27.2	15.5		-	T	S	LN			3.1	8			5
428	PONNULAKSHMI	IV	8412	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		3.5	8		yes	15
429	DHARANI	III	8498	23	PRIMI	23.6	11.6	-	-	PD	G	OU			3.1	8			3
430	KEERTHI	IV	8572	27	PRIMI	35.7	12	-	GHT	T	S	LN			3.2	9			6
431	VANITHA	III	8632	22	G2P1L1	24.1	14.6	-	-	T	S	LN			2.8	8			4
432	NITHYA	III	8699	33	PRIMI	22.6	10.6	-	-	T	S	LN			2.7	8			3
433	SATHYABHAMA	IV	8777	20	PRIMI	18.1	12.9	-	-	T	G	LN			2.4	8			3
434	MONICA	IV	8837	26	G2P1L1	29	12	-	-	T	S	VA			3.4	8			4
435	SHOBANA	III	8898	23	PRIMI	28.4	10.6	-	-	T	S	LN			2.9	9			3

436	ANANDHI	IV	8956	19	PRIMI	18	13.5	-	-	T	G	OU			2.5	9			3
437	NIRMALA	III	8999	30	G2P1L1	27.2	11.7	-	-	T	G	OU			3.2	8			4
438	KANIGA	II	9007	27	G3A2	28.4	12.5	-	-	T	S	LN			3.3	7			3
439	MALLIGA	III	9067	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	8			4
440	KAUSALYA	IV	9257	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3
441	AYYAMMAL	IV	9347	29	G2P1L1	28.4	10	-	-	PD	G	LSCS	FI		2.9	9			10
442	HASEERA BANU	IV	9437	29	G2P1L1	27.2	8.5	-	-	T	S	LN			2.1	9	yes/PT		13
443	KALPANA	III	9527	25	PRIMI	23.4	13	-	-	T	S	LN			2.4	8			4
444	DIVYA	IV	9598	25	PRIMI	22.8	12	-	-	T	S	LN			2.6	8			3
445	GUNAVATHI	III	9600	24	PRIMI	24.6	12.6	-	-	T	S	LN			2.9	8			3
446	RANMYA	IV	9678	25	PRIMI	24.4	12	-	-	T	S	LN			2.9	9			3
447	NAGAMMAL	V	9734	21	PRIMI	26.4	8.5	-	-	T	S	LN			3.3	8			4
448	ARCHANA	III	9799	34	G2P1L1	27.2	9.5	-	-	T	S	LN			2.9	9			4
449	SATHYA PRIYA	IV	9823	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	CP		2.8	8	yes/RD		9
450	ROHINI	II	9856	30	PRIMI	23.1	12.3	-	-	T	S	LN			2.6	7			3
451	SATHYA DEVI	III	9946	24	G2A1	24.2	10.5	-	-	T	S	LSCS	CPD		3.2	8			4
452	SWATHY	III	10004	33	PRIMI	27	10	-	-	T	S	LN			2.8	9			3
453	UMAVATHY	IV	10067	19	G2P1L1	17.9	14.6	-	-	T	S	LSCS	FD		2.9	8			8
454	SULOCHANA	III	10132	31	G2A1	23.4	12.5	-	-	T	S	LN			2.8	7			4
455	SARAWATHI	IV	10178	25	PRIMI	21.5	10.6	-	GHT	T	S	LN			2.7	8			3
456	CHITHIRAI SELVI	III	10199	20	PRIMI	22.4	10.5	-	-	T	G	LN			2.4	9			4
457	JAYAMEENA	III	10255	29	G2P1L1	35.9	13.6	GDM	-	T	S	LN			3.2	9			5
458	KOTEESHWARI	IV	10293	23	PRIMI	22.8	13.7	-	-	T	S	LN			2.7	8			3
459	SUGANTHI	IV	10300	29	G2P1L1	28.2	15.6		-	PT	S	LN			2.2	8	yes/PT		6
460	ANUJA	III	10378	28	PRIMI	27	10	-	-	PD	G	LSCS	FD		3.1	7			8

461	ALAMELU	IV	10465	30	G2P1L1	26.4	10	-	-	T	S	LN			2.8	7			4
462	BRINDHA	III	10545	28	PRIMI	24.4	14.3	-	Ecl	PT	G	LN			2.1	9	yes/RD	yes	14
463	ARPUDHAM	II	10598	21	G2A1	28.6	12.6	-	-	T	S	LN			2.4	6			3
464	YAMINI	III	10665	27	G3P1L1A1	24.4	14	-	-	T	S	LN			2.6	7			3
465	PALLAVI	IV	10693	20	PRIMI	18.4	10.7	-	-	T	S	LN			2.2	8			4
466	CHANDRA	IV	10745	31	G3P2L2	30.3	9.4		GHT	T	S	LN			2.4	8			5
467	VAHITHA	IV	10800	33	G2P1L1	31.2	14.5			PD	G	LN			2.7	8			4
468	NIRMALA	III	10862	34	PRIMI	26.4	12.4	GDM	GHT	T	S	LSCS	CPD		3.6	8			10
469	RADHA	IV	10909	31	PRIMI	27.5	10	-	-	T	S	LN			2.9	8			4
470	JAYA	III	10934	30	G2P1L1	28.4	8	-	-	T	S	LN			3.1	9			3
471	SINDHU	IV	11023	21	PRIMI	18.2	12.8	-	-	T	S	LN			2.5	7			4
472	SIVARANJANI	V	11167	24	PRIMI	30.5	12			PT	S	LN			1.8	9	yes/PT		7
473	ABIRAMI	III	11234	22	PRIMI	22.4	15.7	-	-	T	S	OU			3.1	8			4
474	SHARMILA	IV	11298	22	G2P1L1	21.6	16.5	-	-	T	S	LN			2.8	8			3
475	PREMA	II	11342	20	PRIMI	18	8	-	-	PT	S	LN			1.7	9			10
476	VIGNESHWARI	III	11389	26	G2P1L1	29	15.4	-	Sev	PT	G	LSCS	FD		2.1	7	yes/PT	yes	15
477	BALASUNDHARI	III	11482	27	G2P1L1	26.4	10.4	-	-	T	S	LN			3.1	7			4
478	SWATHI	IV	11564	21	G2A1	23.4	12	-	-	T	S	LN			2.9	8			3
479	RAJINI	III	11622	25	G2A1	28.2	8	-	Mild	T	S	VAC			3.3	9			4
480	VEDHAVALLI	IV	11705	26	G3P2L2	22.5	10	-	-	T	S	LN			2.9	9			3
481	KASIAMMAL	III	11787	26	PRIMI	31.3	12.2			PD	G	LSCS	FD		3.1	8	YES/MAS		8
482	KANNAMMAL	III	11876	23	G2P1L1	24.4	14.5	-	Mild	T	G	LN			2.8	8			4
483	NIROSHA	IV	11933	22	PRIMI	24.2	12.6	-	-	T	S	LN			2.5	8			3
484	RADHA	IV	12000	26	PRIMI	29.4	12.5	-	-	T	S	LN			2.8	9			3
485	SADHANA	III	12067	24	G2P1L1	22.3	10.6	-	-	T	S	LN			2.5	8			4

486	PADHMA	IV	12156	28	G2P1L1	23.6	13.4	-	-	T	S	LN			2.7	8			4
487	SHAKTHI	III	12194	29	G2P1L1	28.2	10.5	-	-	T	S	LN			3.6	8			4
488	VINOTHINI	II	12256	27	PRIMI	28	12.4	-	-	T	S	LN			2.6	9			4
489	NARMADHA DEVI	III	12389	29	G2P1L1	24.4	16.5	-	-	T	S	LN			2.9	8			4
490	SUCHETHA	IV	12463	26	G2P1L1	27.2	10	-	-	T	S	LN			2.8	9			4
491	PADMINI	IV	12527	20	PRIMI	24.2	8.6	-	-	PT	S	LN			1.9	8			6
492	SAROJINI	IV	12589	22	G2P1L1	22.6	14	-	-	T	S	LN			2.5	7			4
493	JOYCE	III	12634	24	PRIMI	26.4	12	-	Ecl	T	G	LSCS	FI		2.4	8	yes/RD		10
494	KAMALA	IV	12696	18	G2A1	21.8	10.5	-	-	T	S	LSCS	FD		3.2	7	yes/MAS		9
495	KALAIVANI	III	12704	30	G2A1	29.4	15.5	-	-	T	S	LN			2.8	6			3
496	GOWRI	IV	12778	19	G2A1	24.1	8.5	-	-	T	S	LSCS			3.1	9			8
497	SAHAANA	V	12846	22	PRIMI	26.8	12.6	-	-	PD	G	LN			2.9	8			3
498	DHIVYA	III	12899	21	PRIMI	27.2	15	-	-	T	S	LSCS	FD		3	8		yes	14
499	KAVYA	IV	12933	23	G2P1L1	28.4	10.5	-	-	T	S	OU			3.3	8			4
500	KAMINI	II	13003	28	G2P1L1	23.2	10	-	-	T	S	OU			3.1	8			3
501	PONNI	III	13098	26	PRIMI	33.2	10	GDM		T	G	LSCS	FD		3.2	9	YES/IDM	YES	17
502	MEGALA	III	13112	27	G2P1L1	26.4	10.3	-	SEV	T	S	LN			2.8	8			5
503	RUBY	IV	13167	21	G2A1	23.4	12	-	-	T	S	OU			2.6	9			4
504	VARALAKSHMI	III	13287	25	G2A1	28.2	8.4	-	-	T	S	LN			3.3	8			3
505	MANGALAM	IV	13367	26	G3P2L2	22.5	10.2	-	-	T	S	LN			2.8	9			4
506	VEENA	III	13478	26	G2P1L1	33.7	12	-	-	T	S	LN			3.2	8			6
507	PREETHI	III	13524	23	G2P1L1	24.4	14	-	-	T	S	LSCS	FD		3	8			4
508	NIVETHA	IV	13599	22	PRIMI	24.2	12.4	-	-	T	S	LN			2.5	8			4
509	VEERALAKSHMI	IV	13687	26	PRIMI	29.4	12.6	GDM	-	T	S	OU		PPH	3.7	9			8
510	ANBUMALAR	III	13749	24	G2P1L1	18	10.2	-	GHT	T	G	LN			2.4	8		-	8

511	ANGEL	IV	13796	28	G2P1L1	23.6	13.2	-	-	T	S	LN			2.6	8			4
512	RAJASUNDHARI	III	13867	29	G2P1L1	28.2	10	-	-	T	S	LN			2.9	9			3
513	SUGANTHY	II	13903	27	PRIMI	28	12.4	-	-	T	S	LSCS	FD		3.1	7			3
514	GRAHALAKSHMI	III	13999	29	G2P1L1	24.4	16.7	GDM	-	T	S	LN			3.2	9			5
515	SENTHAMILSELVI	IV	14009	26	G2P1L1	27.2	10	-	-	T	S	LN			2.7	5			3
516	SHALINI	IV	14089	20	PRIMI	23.7	8	-	-	T	S	LSCS	FD		2.6	9			8
517	ROSEMARY	IV	14156	22	G2P1L1	22.6	14.6	-	Mild	T	G	LN			2.8	8			5
518	BOBBY	III	14267	24	PRIMI	26.4	12	-	-	T	S	LN			2.8	9			4
519	KOMALA	IV	14367	18	G2A1	21.8	10.6	-	-	T	S	LN			2.9	9			3
520	HARINI	III	14478	30	G2A1	29.4	15	-	GHT	T	S	VAC			3.3	9			4
521	NASEERA	IV	14563	19	G2A1	24.1	8.2	-	-	T	S	LN			2.8	8			3
522	PADHMA	V	14600	22	PRIMI	26.8	12.5	-	-	PT	S	LN			1.9	7	YES/PT		10
523	SHAKILA	III	14698	21	PRIMI	27.2	15.3	-	-	T	S	LN			3.1	9			3
524	PREETHA	IV	14736	23	G2P1L1	28.4	10.1	-	SEV	PT	G	LSCS	FI		2.1	7	YES/PT	YES	17
525	MUMTAJ	II	14827	28	G2P1L1	23.2	15.5	-	-	T	S	LN			2.8	8			4
526	ANGELINE	III	14897	24	G2A1	24.2	10.5	-	Mild	PT	GI	LN			2.1	6	YES/PT	YES	15
527	JAYANTHI	III	14945	33	PRIMI	27	10.7	-	-	T	S	LN			2.9	8			5
528	SUMITHRA	IV	15000	19	G2P1L1	17.9	8.2	-	-	T	S	LN			2.3	9			4
529	KANNAGI	III	15096	31	G2A1	23.4	12.4	-	-	T	S	LN			2.7	8			4
530	REGINA	IV	15167	25	PRIMI	21.5	10.5	-	-	T	S	LSCS	FD		2.8	7	YES/MAS		8
531	KAMALAMMAL	III	15258	20	PRIMI	17.8	10.6	-	-	T	S	LN			2.4	8			4
532	MANONMANI	III	15298	29	G2P1L1	42.1	9	GDM	GHT	T	ELEC	LSCS	CPD		3.6	8			12
533	INDHUJA	IV	15356	23	PRIMI	22.8	13	-	-	T	S	OU			3.1	8			4
534	MOTHY	IV	15396	29	G2P1L1	28.2	15.5	-	-	T	S	LN			2.9	9			3
535	SAMANDHI	III	15456	28	PRIMI	27	10.4	-	-	T	S	LSCS	FD		3.2	7			4

536	SAMPOORANAM	IV	15567	30	G2P1L1	26.4	10	-	-	T	S	LN			3.1	8			4
537	SARALADEVI	III	15738	28	PRIMI	24.4	14.5	-	-	T	S	LN			2.5	7			3
538	PRATHEEMA	II	15893	21	G2A1	23.6	12	-	-	T	S	LN			2.4	7			4
539	ANUSYA	III	15763	27	G3P1L1A1	24.4	14.6	-	-	T	S	LN			2.9	8			3
540	VANITHA	IV	15937	20	PRIMI	20.6	10.6	-	-	T	S	LN			2.5	8			4
541	BHAGYALAKSHMI	IV	16004	31	G2P1L1	29	15	GDM	-	T	ELEC	LSCS	CPD		3.8	9	YES/IDM	YES	15
542	KANAGA	IV	16093	33	G3P2L2	30.7	8.7	-		T	S	LN			3.6	8			5
543	KAUSAR BANU	III	16178	34	PRIMI	26.4	12.7	-	-	T	S	LN			3.1	9			4
544	PRABHAVATHI	IV	16234	31	PRIMI	27.5	10.2	-	-	PD	G	LSCS	FD		3.1	8			8
545	VARALAKSHMI	III	16345	30	G2P1L1	28.4	15.8	-	ECL	T	G	LSCS	FD		2.4	7	YES/RD		16
546	BABY	IV	16456	21	PRIMI	18.2	12	-	-	T	S	LN			2.3	8			3
547	NYANADEEPA	V	16567	24	PRIMI	32.1	8			PD	S	VAC			3.4	9			5
548	JHANSI RANI	III	16678	22	PRIMI	22.4	15.2	-	-	T	S	LN		PPH	2.7	7			5
549	NATHIYA	IV	16789	22	G2P1L1	21.6	16	-	-	T	S	LSCS			2.9	8			4
550	THAMARAI	II	16890	20	PRIMI	18	8.4	-	-	PT	S	LN			1.9	7	YES/PT		6
551	TAMILSELVI	III	16901	22	G2P1L1	24.1	14.3	-	-	T	S	LN			2.8	8			4
552	MINNALA	III	16992	33	PRIMI	22.6	10.2	-	-	T	S	LN			2.7	8			3
553	ASHA RANI	IV	17004	20	PRIMI	23.6	12.4	-	-	T	G	LN			2.4	8			3
554	SUPHIYA	III	17123	26	G2P1L1	29	12.5	-	-	T	S	VA		RP	3.4	9			4
555	ESWARI	IV	17198	23	PRIMI	28.4	10	-	-	T	S	LN			2.9	9	YES/RD		3
556	RUPA BAI	III	17234	19	PRIMI	18	13.4	-	-	T	G	OU			2.5	8			3
557	SULOCHANA	III	17345	30	G2P1L1	27.2	11	-	-	PD	G	OU			3.2	7			4
558	VICTORIA	IV	17456	27	G3A2	28.4	12.4	-	-	T	S	LN		PI	3.3	8			3
559	DHANABHAGYAM	IV	17567	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	9			4
560	YUVARANI	III	17678	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3

561	SESILIYA	IV	17789	29	G2P1L1	28.4	10	-	-	T	G	LSCS	FD		2.9	9			10
562	RAMANUJAM	III	17890	29	G2P1L1	27.2	8.5	-	-	PT	S	LN			2.1	8	yes/PT		13
563	JAYAPRABHA	II	17900	25	PRIMI	23.4	13.4	-	-	T	S	LN			2.4	8			4
564	ESTHER RANI	III	17999	25	PRIMI	22.8	12.5	-	-	T	S	LN			2.6	8			3
565	PARIMALA	IV	18046	24	PRIMI	24.6	12.4	-	-	PD	GI	LN			2.9	9			3
566	LAKSHMI	IV	18156	25	PRIMI	24.4	12.4	-	-	T	S	LN			2.9	8			3
567	SHANTHI	IV	18209	21	PRIMI	26.4	8	-	-	T	S	LN		PI	3.3	9			4
568	SWARNA	III	18309	34	G2P1L1	27.2	9.4	-	-	T	S	LN			2.9	8			4
569	KANDHARI	IV	18487	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	OLIGO		2.8	7	yes/RD		9
570	INDHU	III	18598	30	PRIMI	23.1	12	-	-	T	S	LN			2.6	8			3
571	RADHIKA	IV	18675	18	PRIMI	23.2	10.8	-	-	T	S	LN			2.8	8			3
572	SHAKILA	V	18765	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	9			4
573	AMBUJAM	III	18854	24	PRIMI	30.8	12	GDM	-	T	ELEC	LSCS	CPD		4.3	8	YES/IDM	YES	18
574	NAGARAM	IV	18897	24	PRIMI	23.6	12.4	-	Mild	T	G	VA			2.9	8			4
575	VALLIAMMAL	II	18967	24	PRIMI	18	12.2	-	-	T	S	LN			2.3	7			3
576	HABIBU NISHA	III	19005	20	G2P1L1	22.8	10.3	-	-	T	G	LN			3	9			4
577	AMARAVATHY	III	19067	32	PRIMI	24.2	10	-	-	PT	S	LN			1.8	8	yes/PT		10
578	ELAVARASI	IV	19145	29	PRIMI	26.5	12.2	-	-	T	S	LN			3.1	8			5
579	SELVAKUMARI	III	19278	26	PRIMI	24.2	13.4	-	-	T	G	LN			2.6	7			4
580	JAYALAKSHMI	IV	19378	27	PRIMI	23.6	10.5	-	-	T	S	LN			2.8	8			4
581	MYTHILI	III	19489	23	G2P1L1	27.2	12.5	-	SEV	T	G	LN		PPH	2.6	9			6
582	JAQULINE	III	19590	22	G2P1L1	24.2	13.4	-	-	PD	G	LN			2.7	8			8
583	BHAGYA	IV	19601	24	PRIMI	17.4	10.2	-	-	T	S	LN			2.5	9			5
584	SUBATHRA	IV	19712	21	G2A1	23.4	11.3	-	-	T	S	LSCS	FD		2.6	8			3
585	GOMATHY	III	19768	26	PRIMI	22.6	13.3	-	-	T	S	VAC			2.5	8			3

586	RADHA	IV	19827	19	G2P1L1	23.4	12	GDM	-	T	S	LN			3.4	8			3
587	SANDHANALAKSHMI	III	19987	22	G2P1L1	17.9	11.3	-	-	T	S	LN			2.4	9			4
588	ANANDHI	II	20008	20	PRIMI	28.4	14.2	-	-	T	G	LSCS	FD		3.1	9			10
589	SUMATHI	III	20078	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	8			3
590	MAHA	IV	20156	26	G2A1	31.1	12			T	S	LN			3.5	9			5
591	SARADHA	IV	20198	21	G2P1L1	23.6	12.2	-	GHT	T	G	LN			2.6	8			4
592	UMA DEVI	IV	20256	25	G2P1L1	18	9	-	-	T	S	LN			2.4	8			4
593	GLORY	III	20356	27	G2A1	24.1	10.2	-	-	PT	S	LN			1.9	8	yes/PT		5
594	RUBINI	IV	20473	29	G2P1L1	23.8	12.2	-	Mild	T	G	LSCS	FI		3	9			11
595	GAYATHIRI DEVI	III	20587	20	G2P1L1	18.2	10.5	-	-	T	S	LN			2.3	8			4
596	JAMAIMAL	IV	20678	22	PRIMI	22.4	10	GDM	-	T	S	LN			3.5	8	YES/IDM		4
597	PUNITHAVATHI	V	20777	29	PRIMI	27.2	15.5		-	T	S	OU			3.1	8			5
598	JAIRA BANU	III	20871	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		4.1	8	yes/IDM	yes	15
599	SARANYA	IV	20902	23	PRIMI	23.6	11.4	-	-	T	S	LN			3.1	9			3
600	PREMA LATHA	II	20987	27	G2P1L1	30.7	10.4			T	S	LN			3	8			5
601	DURGA	III	21073	18	PRIMI	23.2	14.2	-	-	T	S	LN			2.8	8			3
602	MANIMEGALAI	III	21134	22	G2P1L1	22.4	10.5	-	-	T	S	LN			2.7	9	yes/PT		4
603	INDHRANI	IV	21257	32	PRIMI	24.2	12	GDM	-	PT	S	LN			1.8	8			10
604	SHOBANA	III	21321	24	PRIMI	23.6	12.6	-	-	T	G	VA			2.9	8			4
605	PARVATHY	IV	21389	24	PRIMI	18	10.5	-	-	T	S				2.4	7			3
606	STELLA MARY	III	21453	20	G2P1L1	22.8	9.4	-	-	T	G	LN			3	9			4
607	JAYASUDHA	III	21598	24	PRIMI	31.8	12			PT	S	LN			2	8	YES/PT		9
608	VIJAYALAKSHMI	IV	21654	29	PRIMI	26.5	13.6	-	GHT	T	G	OU			3.1	8			5
609	MITHAR BEEVI	IV	21765	26	PRIMI	24.2	10	-	GHT	T	G	LN			2.6	7			4
610	SREEJA	III	21843	27	PRIMI	23.6	12.5	-	-	T	S	LN			2.8	8			4

611	LAKSHMI DEVI	IV	21890	23	G2P1L1	27.2	13.5	-	-	T	S	LN			2.6	9			4
612	CHINNA PONNU	III	21956	22	G2P1L1	24.2	10	-	-	PD	G	LSCS	FI		2.7	8			8
613	NIRMALA	II	22121	24	PRIMI	17.4	11.4	-	-	T	S	LN			2.5	9			5
614	RABIYA	III	22254	21	G2A1	23.4	13.4	-	-	T	S	LN			2.6	8			3
615	VEMBAYEE	IV	22298	26	PRIMI	22.6	12	-	-	T	S	LN			2.5	8			3
616	RADHA	IV	22365	19	G2P1L1	23.4	11	-	-	T	S	LN			2.4	8			3
617	CHINNA PONNU	IV	22390	22	G2P1L1	17.9	14.5	-	-	T	S	LN			2.4	9			4
618	NIRMALA	III	22457	20	PRIMI	28.4	10	-	Mild	T	G	LSCS	FD		3.1	9			10
619	PREETHA	IV	22487	28	PRIMI	24.2	9.2	-	-	T	S	LN			2.6	8			3
620	RAMANI	III	22520	26	G2A1	31.3	12.8			T	S	LN			3.6	9			4
621	FAHIMA	IV	22576	21	G2P1L1	23.6	9	-	-	T	S	LN			2.6	8			4
622	SUGUNA	V	22623	25	G2P1L1	18	10.6	-	-	T	S	LN			2.4	8			4
623	KRISHNAVENI	III	22754	27	G2A1	24.1	12.4		-	PT	S	LN			2	8	yes/PT		5
624	DEVAGI	IV	22789	29	G2P1L1	23.8	10	GDM	Mild	T	G	LSCS	FD		3	9	yes/IDM		11
625	SHANTHI PRIYA	II	22834	20	G2P1L1	18.2	10.5	-	-	T	S	LN			2.3	8			4
626	PRIYA KUMARI	III	22976	22	PRIMI	22.4	15.5	-	-	T	S	LN			2.9	8			4
627	KALADEVI	III	23065	29	PRIMI	27.2	15		-	T	S	LN			3.1	8			5
628	MALA	IV	23087	32	G3P2L2	28.3	11.6	GDM	-	T	G	LSCS	CPD		3.5	8		yes	15
629	SHANTHINI	III	23156	23	PRIMI	23.6	12	-	-	PD	G	OU			3.1	9			3
630	JOYTHILAKSHMI	IV	23187	27	G2P1L1	30.8	14.6			T	S	LN			3.4	8			5
631	KALAIRANI	III	23256	22	G2P1L1	24.1	10.6	-	-	T	S	LN			2.8	8			4
632	REKHASUDHA	III	23276	33	PRIMI	22.6	12.9	-	-	T	S	LN			2.7	8			3
633	MUTHULAKSHMI	IV	23365	20	PRIMI	18.1	12	-	-	T	G	LN			2.4	8			3
634	VAITHEESHVARI	IV	23398	26	G2P1L1	29	10.6	-	-	T	S	VA			3.4	9			4
635	KALAISELVI	III	23478	23	PRIMI	28.4	13.5	-	-	T	S	LN			2.9	9			3

636	CHRISTEENA	IV	23598	19	PRIMI	18	11.7	-	-	T	G	OU			2.5	8			3
637	KUPPUSELVI	III	23405	30	G2P1L1	27.2	12.5	-	-	T	G	OU			3.2	7			4
638	MYTHILI	II	23489	27	G3A2	28.4	15.5	-	-	T	S	LN			3.3	8			3
639	SANGEETHA	III	23512	21	PRIMI	24.2	10.4	-	-	T	S	LN			2.7	9			4
640	GIRIJA	IV	23587	24	PRIMI	28.2	10	-	-	T	S	LN			2.6	9			3
641	SHAKILA	IV	23634	29	G2P1L1	28.4	8.5	-	-	PD	G	LSCS	FI		2.9	9			10
642	KARTHIGA	IV	23698	29	G2P1L1	27.2	13	-	-	T	S	LN			2.1	8	yes/PT		13
643	VALLIAMMAL	III	23765	25	PRIMI	23.4	12	-	-	T	S	LN			2.4	8			4
644	SHAKILA	IV	23845	25	PRIMI	22.8	12.6	-	-	T	S	LN			2.6	8			3
645	SIRASHAKTHI	III	23898	24	PRIMI	24.6	12	-	-	T	S	LN			2.9	9			3
646	VIJAYA	IV	23912	25	PRIMI	24.4	8.5	-	-	T	S	LN			2.9	8			3
647	KRISHNAKUMARI	V	23965	21	PRIMI	26.4	9.5	-	-	T	S	LN			3.3	9			4
648	SUGHASHINI	III	24004	34	G2P1L1	27.2	15.4	-	-	T	S	LN			2.9	8			4
649	KALPANI	IV	24128	28	PRIMI	22.2	12.3	-	-	T	S	LSCS	CP		2.8	7	yes/RD		9
650	MEENA KUMARI	II	24167	30	PRIMI	23.1	10.5	-	-	T	S	LN			2.6	8			3
651	LOGANAYAKI	III	24276	24	G2A1	24.2	10	-	-	T	S	LSCS	CPD		3.2	9			4
652	PARVATHAM	III	24298	33	PRIMI	27	14.6	-	-	T	S	LN			2.8	8			3
653	ANJALAI	IV	24356	19	G2P1L1	17.9	12.5	-	-	T	S	LSCS	FD		2.9	7			8
654	RATHINA KUMARI	III	24368	31	G2A1	23.4	10.6	-	-	T	S	LN			2.8	8			4
655	NIRMALA	IV	24453	25	PRIMI	21.5	10.5	-	GHT	T	S	LN			2.7	9			3
656	DEVAKI	III	24521	20	PRIMI	17.8	13.6	-	-	T	G	LN			2.4	9			4
657	KALAISELVI	III	24696	29	G2P1L1	31.4	13.7	GDM		T	S	VAC			3.3	7			7
658	KANAGAVALLI	IV	24608	23	PRIMI	22.8	15.6	-	-	T	S	LN		PPH	2.7	8			3
659	ANJALI	IV	24732	29	G2P1L1	28.2	10		-	PT	S	LN			2.2	7	yes/PT		6
660	MARY	III	24796	28	PRIMI	27	10	-	-	PD	G	LSCS	FD		3.1	7			8

661	KANAMMAL	IV	24833	30	G2P1L1	26.4	14.3	-	-	T	S	LN			2.8	9			4
662	JOSEPHINE	III	24903	28	PRIMI	24.4	12.6	-	Ecl	PT	G	LN			2.1	6	yes/RD	yes	14
663	VANITHA	II	24966	21	G2A1	20.8	14	-	-	T	S	LN			2.4	7			3
664	SIULOCHANA	III	25008	27	G3P1L1A1	24.4	10.7	-	-	T	S	LN			2.6	8			3
665	NISHA	IV	25102	20	PRIMI	18.4	9.4	-	-	T	S	LN			2.2	8			4
666	JASMINE	IV	25189	31	G2P1L1	32.4	14.5			T	S	LSCS	FD		3.4	9		YES	15
667	LAKSHMI	IV	25227	33	G3P2L2	30.9	12.4			PD	G	OU			3.1	8			6
668	KAVERY	III	25276	34	PRIMI	26.4	10	GDM	GHT	T	S	LSCS	CPD		3.6	8			10
669	CHINNAKULANTHAI	IV	26132	31	PRIMI	27.5	8	-	-	T	S	LN			2.9	9			4
670	DHANABHAGYAM	III	26435	30	G2P1L1	28.4	12.8	-	-	T	S	LN			3.1	7			3
671	JAYARANI	IV	26759	21	PRIMI	22.4	12	-	-	T	S	LN			2.5	9			4
672	RAMI	V	26863	24	PRIMI	32.6	15.7			T	S	LN		PPH	2.8	7			4
673	NANDHINI	III	26965	22	PRIMI	22.4	16.5	-	-	T	S	OU			3.1	8			4
674	UMARANI	IV	27387	22	G2P1L1	21.6	8	-	-	T	S	LN			2.8	9			3
675	SOUNDGARYA	II	27481	20	PRIMI	18	15.4	-	-	PT	S	LN			1.7	7			10
676	BHARATHI	III	27502	26	G2P1L1	29	10.4	-	Sev	PT	G	LSCS	FD		2.1	7	yes/PT	yes	15
677	PRASHANTHI	III	27583	27	G2P1L1	26.4	12	-	-	T	S	LN			3.1	8			4
678	BHANUMATHI	IV	27666	21	G2A1	23.4	8	-	-	T	S	LN			2.9	9			3
679	MEENA	III	27743	25	G2A1	28.2	10	-	Mild	T	S	VAC			3.3	9			4
680	KALAVATHY	IV	27943	26	G3P2L2	22.5	12.2	-	-	T	S	LN			2.9	8			3
681	ELAVARASY	III	28067	26	PRIMI	31.5	14.5	GDM		T	S	LN			3.1	9			3
682	THARAGESHVARI	III	28112	23	G2P1L1	24.4	12.6	-	Mild	T	G	LN			2.8	8			4
683	SWARNA	IV	28229	22	PRIMI	24.2	12.5	-	-	T	S	LN			2.5	9			3
684	RAJESHWARI	IV	28345	26	PRIMI	29.4	10.6	-	-	T	S	LN			2.8	8			3
685	KAMALA	III	28679	24	G2P1L1	18	13.4	-	-	T	S	LN			2.5	8			4

686	CHANDRA	IV	28821	28	G2P1L1	23.6	10.5	-	-	T	S	LN			2.7	8			4
687	VALARMATHY	III	28563	29	G2P1L1	28.2	12.4	-	-	T	S	LN			3.6	9			4
688	SELVI	II	28921	27	PRIMI	28	16.5	-	-	T	S	LN			2.6	8			4
689	SEETHA LAKSHMI	III	29253	29	G2P1L1	24.4	10	-	-	T	S	LN			2.9	9			4
690	NALINI	IV	29142	26	G2P1L1	27.2	8.6	-	-	T	S	LN			2.8	8			4
691	KANNIGA	IV	29468	20	PRIMI	17.9	14	-	-	PT	S	LN			1.9	7			6
692	KARPAGAVALLI	IV	29582	22	G2P1L1	22.6	12	-	-	T	S	LN			2.5	8			4
693	ROOPAVATHY	III	29763	24	PRIMI	26.4	10.5	-	Ecl	T	G	LSCS	FD		2.4	7	yes/RD		10
694	PRIYA	IV	29845	18	G2A1	21.8	15.5	-	-	T	S	LSCS	FD		3.2	6	yes/MAS		9
695	DHANA	III	29937	30	G2A1	29.4	8.5	-	-	T	S	LN			2.8	9			3
696	GOWRI	IV	30053	19	G2A1	24.1	12.6	-	-	T	S	LSCS	CPD		3.1	8			8
697	ANANDHY	V	30176	22	PRIMI	26.8	15	-	-	PD	G	LN			2.9	8			3
698	GAJALAKSHMI	III	30435	21	PRIMI	27.2	10.5	-	-	T	S	LSCS	FD		3	8		yes	14
699	USHA	IV	30786	23	G2P1L1	28.4	10	-	-	T	S	OU			3.3	8			4
700	ELAMMAL	II	30820	28	G2P1L1	23.2	12	-	-	T	S	OU			3.1	9			3
701	GEETHAPRIYA	III	30999	26	PRIMI	32.2	10		GHT	T	S	LN			3.2	8			4
702	BHARATHY	III	31035	27	G2P1L1	26.4	10.3	-	SEV	T	S	LN			2.8	8			5
703	ZAHEERA BEGUM	IV	31167	21	G2A1	23.4	12	-	-	T	S	OU			2.6	9			4
704	LEELAVATHY	III	31633	25	G2A1	28.2	8.4	-	-	T	S	LN			3.3	8			3
705	ANANDHY	IV	31782	26	G3P2L2	22.5	10.2	-	-	T	S	LN			2.8	9			4
706	PALANIAMMAL	III	31910	26	G2P1L1	41.3	9	GDM		T	ELEC	LSCS	CPD		3.4	8			5
707	MAITHEEN BEGUM	III	32004	23	G2P1L1	24.4	14	-	-	T	S	LN			3	8			4
708	RENUKA	IV	32182	22	PRIMI	24.2	12.4	-	-	T	S	LN			2.5	8			4
709	RADHADEVI	IV	32453	26	PRIMI	29.4	12.6	GDM	-	T	S	OU		PPH	3.7	9			8
710	SHAGINA	III	32778	24	G2P1L1	18	10.2	-	GHT	T	G	LN			2.4	8		-	8

711	MALLI	IV	32811	28	G2P1L1	23.6	13.2	-	-	T	S	LN			2.6	8			4
712	GOMATHY	III	32903	29	G2P1L1	28.2	10	-	-	T	S	LN			2.9	9			3
713	JAYAKODI	II	33008	27	PRIMI	28	12.4	-	-	T	S	LN			3.1	7			3
714	MAHALAKSHMI	III	33167	29	G2P1L1	24.4	16.7	GDM	-	T	S	LN			3.2	9			5
715	REKHA	IV	33435	26	G2P1L1	27.2	10	-	-	T	S	LN			2.7	5			3
716	KAVITHA	IV	33673	20	PRIMI	20.7	8	-	-	T	S	LSCS	FD		2.6	9			8
717	ASHA DEVI	IV	33946	22	G2P1L1	22.6	14.6	-	Mild	T	G	LN			2.8	8			5
718	GEETHAPRIYA	III	33792	24	PRIMI	26.4	12	-	-	T	S	LN			2.8	9			4
719	ESAIRANI	IV	33444	18	G2A1	21.8	10.6	-	-	T	S	LN			2.9	9			3
720	PARAMESHWARI	III	33563	30	G2A1	29.4	15	-	GHT	T	S	VAC			3.3	9			4
721	MUTHUSELVI	IV	33823	19	G2A1	24.1	8.2	-	-	T	S	LN			2.8	8			3
722	GEETHA	V	33962	22	PRIMI	26.8	12.5	-	-	PT	S	LN			1.9	7	YES/PT		10
723	JOTHY	III	33109	21	PRIMI	27.2	15.3	-	-	T	S	LN			3.1	9			3
724	NABEESHA BEGUM	IV	33223	23	G2P1L1	28.4	10.1	-	SEV	PT	G	LSCS	FI		2.1	7	YES/PT	YES	17
725	MALATHY	II	33767	28	G2P1L1	23.2	15.5	-	-	T	S	LN			2.8	8			4
726	KRISHNARANI	III	33010	26	PRIMI	35.9	8.5	GDM		T	S	LN			3.5	9			6
727	JENNY	III	33564	27	G2P1L1	26.4	10.3	-	SEV	T	S	LN			2.8	8			5
728	MANJULA	IV	33782	21	G2A1	23.4	12	-	-	T	S	OU			2.6	9			4
729	ANNAPOORANI	III	33811	25	G2A1	28.2	8.4	-	-	T	S	LN			3.3	8			3
730	NEELAVENI	IV	33111	26	G3P2L2	22.5	10.2	-	-	T	S	LN			2.8	9			4
731	GOMATHY	III	34002	26	G2P1L1	31.5				T	S	LN		RP	3.2	8			6
732	DHATCHYANI	III	34229	23	G2P1L1	24.4	14	-	-	T	S	LN			3	8			4
733	SUJATHA	IV	34178	22	PRIMI	24.2	12.4	-	-	T	S	LN			2.5	8			4
734	VIMALA	IV	34435	26	PRIMI	29.4	12.6	GDM	-	T	S	OU		PPH	3.7	9			8
735	KALAISELVI	III	34956	24	G2P1L1	18	10.2	-	GHT	T	G	LN			2.4	8		-	8

736	AMALA	IV	30987	28	G2P1L1	23.6	13.2	-	-	T	S	LN			2.6	8			4
737	PREMA LATHA	III	30965	29	G2P1L1	28.2	10	-	-	T	S	LN			2.9	9			3
738	DEEPIKA	II	31082	27	PRIMI	28	12.4	-	-	T	S	LN			3.1	7			3
739	SATHYA	III	34562	29	G2P1L1	24.4	16.7	GDM	-	T	S	LN			3.2	9			5
740	ANARKALI	IV	34893	26	G2P1L1	27.2	10	-	-	T	S	LN			2.7	5			3
741	SHYAMALA	IV	34966	20	PRIMI	17.9	8	-	-	T	S	LSCS	FD		2.6	9			8
742	KUMUDHA	IV	32338	22	G2P1L1	22.6	14.6	-	Mild	T	G	LN			2.8	8			5
743	KOKILA	III	33446	24	PRIMI	26.4	12	-	-	T	S	LN			2.8	9			4
744	THULASI	IV	31343	18	G2A1	21.8	10.6	-	-	T	S	LN			2.9	9			3
745	AMUDHA	III	32889	30	G2A1	29.4	15	-	GHT	T	S	VAC			3.3	9			4
746	BHAVANI	IV	30555	19	G2A1	24.1	8.2	-	-	T	S	LN			2.8	8			3
747	MALATHI	V	34837	22	PRIMI	26.8	12.5	-	-	T	S	LN			1.9	7			10
748	USHA RANI	III	34222	21	PRIMI	27.2	15.3	-	-	T	S	LN			3.1	9			3
749	RUBY	IV	34901	23	G2P1L1	28.4	10.1	-	SEV	PT	G	LSCS	FD		2.1	7	YES/PT	YES	17
750	VRNKATAMMA	II	34176	28	G2P1L1	23.2	15.5	-	-	T	S	LN			2.8	8			4
751	SARASWATHI	III	34923	18	PRIMI	23.2	10.8	-	-	T	S	LN			2.8	8			3
752	KALAIVANI	III	34346	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	9			4
753	LAXMI	IV	30924	24	PRIMI	36.2	12		ECL	PT	G	LSCS	FD		2.1	8			15
754	ARCHANA	III	30123	24	PRIMI	23.6	12.4	-	Mild	T	G	VA			2.9	8			4
755	BHAGYALAKSHMI	IV	31882	24	PRIMI	18	12.2	-	-	T	S	LN			2.3	7			3
756	THAMARAISELVI	III	31254	20	G2P1L1	22.8	10.3	-	-	T	G	LN			3	9			4
757	PARIMALA	III	33987	32	PRIMI	24.2	10	-	-	PT	S	LN			1.8	8	yes/PT		10
758	SARASWATHY	IV	34210	29	PRIMI	26.5	12.2	-	-	T	S	LN			3.1	8			5
759	CHITRA	IV	33764	26	PRIMI	24.2	13.4	-	-	T	G	LN			2.6	7			4
760	RENUKA	III	33980	27	PRIMI	23.6	10.5	-	-	T	S	LN			2.8	8			4

761	AMUDHA	IV	33619	23	G2P1L1	27.2	12.5	-	SEV	T	G	LN		PPH	2.6	9			6
762	DHANALAKSHMI	III	33728	22	G2P1L1	24.2	13.4	-	-	PD	G	LN			2.7	8			8
763	GEETHA	II	33750	24	PRIMI	17.4	10.2	-	-	T	S	LN			2.5	9			5
764	NANDHINI	III	34882	21	G2A1	23.4	11.3	-	-	T	S	LSCS	FD		2.6	8			3
765	NIRMALA	IV	34110	26	PRIMI	22.6	13.3	-	-	T	S	VAC			2.5	8			3
766	POONGIDI	IV	34882	19	G2P1L1	23.4	12	GDM	-	T	S	LN			3.4	8			3
767	SAMUNDESHWARI	IV	34557	22	G2P1L1	22.1	11.3	-	-	T	S	LN			2.4	9			4
768	SINTHU	III	33892	20	PRIMI	28.4	14.2	-	-	T	G	LSCS	FD		3.1	9			10
769	SHAKTHI	IV	33892	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	8			3
770	PADMAJA	III	33123	26	G2P1L1	30.3	10.5	GDM		PT	S	LN			2.3	9	yes/PT		5
771	REKHA	IV	33256	21	G2P1L1	23.6	12.2	-	GHT	T	G	LN			2.6	8			4
772	JOTHY	V	33765	25	G2P1L1	28.7	9	-	-	T	S	LN			2.4	8			4
773	JULIE	III	33654	27	G2A1	24.1	10.2	-	-	PT	S	LN			1.9	8	yes/PT		5
774	SUGANYA	IV	33457	29	G2P1L1	23.8	12.2	-	Mild	T	G	LSCS	FI		3	9			11
775	AMIRTHAM	II	33125	20	G2P1L1	18.2	10.5	-	-	T	S	LN			2.3	8			4
776	MOHANA	III	33786	22	PRIMI	22.4	10	GDM	-	T	S	LN			3.5	8	YES/IDM		4
777	AMUL	III	30987	29	PRIMI	27.2	15.5		-	T	S	OU			3.1	8			5
778	ARUNDHATHI	IV	30676	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		4.1	8	yes/IDM	yes	15
779	MADHANA	III	31675	23	PRIMI	23.6	11.4	-	-	T	S	LN			3.1	9			3
780	DURGA	IV	32678	27	G2P1L1	36.2	12			T	S	VAC			3.4	8			5
781	ANANDHI	III	32568	22	G2P1L1	24.1	14.3	-	-	T	S	LN			2.8	8			4
782	RANJITHA	III	32785	33	PRIMI	22.6	10.2	-	-	T	S	LN			2.7	8			3
783	SILAMBARASI	IV	33879	20	PRIMI	18.1	12.4	-	-	T	G	LN			2.4	8			3
784	KURALARASI	IV	33876	26	G2P1L1	29	12.5	-	-	T	S	VA		RP	3.4	9			4
785	MALLIGA	III	33246	23	PRIMI	28.4	10	-	-	T	S	LN			2.9	9	YES/RD		3

786	RUBY	IV	33675	19	PRIMI	28.5	13.4	-	-	T	G	OU			2.5	8			3
787	PRIYA	III	34897	30	G2P1L1	27.2	11	-	-	PD	G	OU			3.2	7			4
788	JAYANTHI	II	34276	27	G3A2	28.4	12.4	-	-	T	S	LN		PI	3.3	8			3
789	SHANTHA	III	34287	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	9			4
790	FARKATH NISHA	IV	35098	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3
791	SHARMILA	IV	35132	29	G2P1L1	28.4	10	-	-	T	G	LSCS	FI		2.9	9			10
792	JAYARADHA	IV	35234	29	G2P1L1	27.2	8.5	-	-	PT	S	LN			2.1	8	yes/PT		13
793	MYTHILI	III	35464	25	PRIMI	23.4	13.4	-	-	T	S	LN			2.4	8			4
794	LAKSHMI	IV	35765	25	PRIMI	22.8	12.5	-	-	T	S	LN			2.6	8			3
795	MAGESHWARI	III	35567	24	PRIMI	24.6	12.4	-	-	PD	GI	LN			2.9	9			3
796	DEVI PRIYA	IV	35676	25	PRIMI	24.4	12.4	-	-	T	S	LN			2.9	8			3
797	RAMI PRIYA	V	35765	21	PRIMI	26.4	8	-	-	T	S	LN		PI	3.3	9			4
798	VAIDHEGI	III	32875	34	G2P1L1	27.2	9.4	-	-	T	S	LN			2.9	8			4
799	MAGESWARI	IV	34086	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	OLIGO		2.8	7	yes/RD		9
800	ANITHA	II	32865	30	PRIMI	23.1	12	-	-	T	S	LN			2.6	8			3
801	SELVI	III	35908	18	PRIMI	23.2	10.4	-	-	T	S	LN			2.8	8			3
802	MUTHUSELVI	III	35871	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	9	yes/PT		4
803	PADMA PRIYA	IV	35282	32	PRIMI	24.2	10.5	GDM	-	PT	S	LN			1.8	8			10
804	REVATHY	III	35981	24	PRIMI	23.6	12	-	-	T	G	VA			2.9	8			4
805	KUMUDHA	IV	36870	24	PRIMI	22.6	10			T	S	LN			2.6	8			3
806	JEERA	III	36223	20	G2P1L1	22.8	10.5	-	-	T	G	LN			3	9			4
807	SEETHA LAKSHMI	III	36332	24	G2A1	31.3	9.4			T	S	LN			2.9	8			4
807	KASTHURI	IV	31889	29	PRIMI	26.5	12	-	GHT	T	G	OU			3.1	8			5
809	VINOTHA	IV	29780	26	PRIMI	24.2	13.6	-	GHT	T	G	LN			2.6	7			4
810	PRIYA	III	28123	27	PRIMI	23.6	10	-	-	T	S	LN			2.8	8			4

811	DEEPALAKSHMI	IV	29565	23	G2P1L1	27.2	12.5	-	-	T	S	LN			2.6	9			4
812	SATHYA	III	29298	22	G2P1L1	24.2	13.5	-	-	PD	G	LSCS	FI		2.7	8			8
813	CHITRA	II	27690	24	PRIMI	22.4	10	-	-	T	S	LN			2.5	9			5
814	KAVITHA	III	24678	21	G2A1	23.4	11.4	-	-	T	S	LN			2.6	8			3
815	PUSHPALATHA	IV	34519	26	PRIMI	22.6	13.4	-	-	T	S	LN			2.5	8			3
816	SATHYA	IV	32874	19	G2P1L1	23.4	12	-	-	T	S	LN		PPH	2.4	8			3
817	MERINA	IV	36110	22	G2P1L1	22.4	11	-	-	T	S	LN			2.4	9			4
818	NANDHINI	III	36098	20	PRIMI	28.4	14.5	-	Mild	T	G	LSCS	FD		3.1	9			10
819	ANJALIDEVI	IV	36125	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	8			3
820	GNANAMARY	III	36748	26	G2P1L1	30.9	9.2			T	S	LN			3.4	9			4
821	KALAIRANI	IV	36874	21	G2P1L1	23.6	12.8	-	-	T	S	LN			2.6	8			4
822	KOTEESHVARI	V	36980	25	G2P1L1	22.1	9	-	-	T	S	LN			2.4	8			4
823	JAQUILINE	III	36098	27	G2A1	24.1	10.6		-	PT	S	LN			2	8	yes/PT		5
824	VIJITHA	IV	36998	29	G2P1L1	23.8	12.4	GDM	Mild	T	G	LSCS	FD		3	9	yes/IDM		11
825	PARVEEN	II	36009	20	G2P1L1	20.9	10	-	-	T	S	LN			2.3	8			4
826	LAKSHMI	III	36667	22	PRIMI	22.4	10.5	-	-	T	S	LN			2.9	8			4
827	BOMMI	III	32789	29	PRIMI	27.2	15.5		-	T	S	LN			3.1	8			5
828	SAMEENA TARARAM	IV	29534	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		3.5	8		yes	15
829	PRIYA	III	27394	23	PRIMI	23.6	11.6	-	-	PD	G	OU			3.1	9			3
830	MAHALAKSHMI	IV	32974	27	G2P1L1	31.5	12			T	G	LN			3.1	8			5
831	UMA RANI	III	29191	22	G2P1L1	24.1	14.6	-	-	T	S	LN			2.8	8			4
832	MADHAVI	III	29990	33	PRIMI	22.6	10.6	-	-	T	S	LN			2.7	8			3
833	UROOSA	IV	31830	20	PRIMI	18.1	12.9	-	-	T	G	LN			2.4	8			3
834	DEVI PRIYA	IV	35814	26	G2P1L1	29	12	-	-	T	S	VA			3.4	9			4
835	SHAMINA	III	36745	23	PRIMI	28.4	10.6	-	-	T	S	LN			2.9	9			3

846	MAMUTHA BEGUM	IV	31903	19	PRIMI	18	13.5	-	-	T	G	OU			2.5	8			3
837	NITHYA	III	28727	30	G2P1L1	27.2	11.7	-	-	T	G	OU		PPH	3.2	7			4
838	VIJAYA	II	27892	27	G3A2	28.4	12.5	-	-	T	S	LN			3.3	8			3
839	RATHNA	III	29120	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	9			4
840	KUPPU BAI	IV	28405	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3
841	DAISY MARY	IV	30027	29	G2P1L1	28.4	10	-	-	PD	G	LSCS	FI		2.9	9			10
842	SHANTHI	IV	30187	29	G2P1L1	27.2	8.5	-	-	T	S	LN			2.1	8	yes/PT		13
843	KALPANA	III	30547	25	PRIMI	23.4	13	-	-	T	S	LN			2.4	8			4
844	SASIKALA	IV	30632	25	PRIMI	22.8	12	-	-	T	S	LN			2.6	8			3
845	SUJA JEYAMANI	III	30537	24	PRIMI	24.6	12.6	-	-	T	S	LN			2.9	9			3
846	MANONMANI	IV	31782	25	PRIMI	24.4	12	-	-	T	S	LN			2.9	8			3
847	MAIVIZHI	V	32734	21	PRIMI	26.4	8.5	-	-	T	S	LN			3.3	9			4
848	RAJALAKSHMI	III	37569	34	G2P1L1	27.2	9.5	-	-	T	S	LN			2.9	8			4
849	SUJATHA	IV	37018	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	CP		2.8	7	yes/RD		9
850	SASIKALA	II	37063	30	PRIMI	23.1	12.3	-	-	T	S	LN			2.6	8			3
851	MALA	III	37045	24	G2A1	24.2	10.5	-	-	T	S	LSCS	CPD		3.2	9			4
852	ANUPRIYA	III	37268	33	PRIMI	27	10	-	-	T	S	LN			2.8	8			3
853	SELVI	IV	37128	19	G2P1L1	17.9	14.6	-	-	T	S	LSCS	FD		2.9	7			8
854	NILA	III	37559	31	G2A1	23.4	12.5	-	-	T	S	LN			2.8	8			4
855	RADHA BAI	IV	37429	25	PRIMI	21.5	10.6	-	GHT	T	S	LN			2.7	9			3
856	USHA	III	37393	20	PRIMI	17.8	10.5	-	-	T	G	LN			2.4	9			4
857	THULASI	III	37465	29	G2P1L1	32.4	13.6	GDM		T	G	LSCS	FD		3.7	8			12
858	SELVI	IV	37450	23	PRIMI	22.8	13.7	-	-	T	S	LN			2.7	8			3
859	ANITHA	IV	35109	29	G2P1L1	28.2	15.6		-	PT	S	LN			2.2	7	yes/PT		6
860	KALPANA	III	36187	28	PRIMI	27	10	-	-	PD	G	LSCS	FI		3.1	7			8

861	KALAI ARASI	IV	36873	30	G2P1L1	26.4	10	-	-	T	S	LN			2.8	9			4
862	CHANDRIKA	III	36982	28	PRIMI	24.4	14.3	-	Ecl	PT	G	LN			2.1	6	yes/RD	yes	14
863	KANNAGI	II	36902	21	G2A1	22.1	12.6	-	-	T	S	LN			2.4	7			3
864	RAJALAKSHMI	III	36729	27	G3P1L1A1	24.4	14	-	-	T	S	LN			2.6	8			3
865	KALAISELVI	IV	36710	20	PRIMI	18.4	10.7	-	-	T	S	LN			2.2	8			4
866	ARCHANA	IV	36796	31	G2P1L1	32.4	9.4		GHT	T	S	OU			3.3	8			5
867	KARPAGAM	IV	36983	33	G3A2	33.6	14.5			T	S	LN			3.2	8			5
868	LATHA	III	28769	34	PRIMI	26.4	12.4	GDM	GHT	T	S	LSCS	CPD		3.6	8			10
869	RUKKU	IV	26935	31	PRIMI	27.5	10	-	-	T	S	LN			2.9	9			4
870	RADHA	III	29013	30	G2P1L1	28.4	8	-	-	T	S	LN			3.1	7			3
871	SUSAI MARY	IV	31098	21	PRIMI	18.2	12.8	-	-	T	S	LN			2.5	9			4
872	INDHIRANI	V	31167	24	PRIMI	30.8	12			T	ELEC	LSCS	PREV		2.8	8			10
873	MUTHAMMAL	III	36547	22	PRIMI	22.4	15.7	-	-	T	S	OU			3.1	8			4
874	SAKUNTHALA	IV	37123	22	G2P1L1	21.6	16.5	-	-	T	S	LN			2.8	9			3
875	GIRIJA	II	36897	20	PRIMI	18	8	-	-	PT	S	LN			1.7	7			10
876	GANDHIMATHY	III	36894	26	G2P1L1	29	15.4	-	Sev	PT	G	LSCS	FD		2.1	7	yes/PT	yes	15
877	LAKSHMI	III	37453	27	G2P1L1	26.4	10.4	-	-	T	S	LN			3.1	8			4
878	PATTAMMAL	IV	37239	21	G2A1	23.4	12	-	-	T	S	LN			2.9	9			3
879	RANI	III	31598	25	G2A1	28.2	8	-	Mild	T	S	VAC			3.3	9			4
880	SAVITHRI	IV	32674	26	G3P2L2	22.5	10	-	-	T	S	LN			2.9	8			3
881	ILANJIGAM	III	32894	26	G2P1L1	31.2	12.2	GDM		T	S	LN			3.2	8			5
882	THANGAM	III	32679	23	G2P1L1	24.4	14.5	-	Mild	T	G	LN			2.8	8			4
883	GOVINDAMMAL	IV	32108	22	PRIMI	24.2	12.6	-	-	T	S	LN			2.5	9			3
884	SHYAMALA	IV	33094	26	PRIMI	29.4	12.5	-	-	T	S	LN			2.8	8			3
885	SHOBA	III	35908	24	G2P1L1	18	10.6	-	-	T	S	LN			2.5	8			4

886	JAYANTHI	IV	36457	28	G2P1L1	23.6	13.4	-	-	T	S	LN			2.7	8			4
887	SUDHA	III	34532	29	G2P1L1	28.2	10.5	-	-	T	S	LN			3.6	9			4
888	ARUNA	II	35430	27	PRIMI	28	12.4	-	-	T	S	LN			2.6	8			4
889	KARUPAYEE	III	32665	29	G2P1L1	24.4	16.5	-	-	T	S	LN			2.9	9			4
890	SARASWATHY	IV	33964	26	G2P1L1	27.2	10	-	-	T	S	LN			2.8	8			4
891	NITHYA	IV	33652	20	PRIMI	17.9	8.6	-	-	PT	S	LN			1.9	7			6
892	POONGODI	IV	33029	22	G2P1L1	22.6	14	-	-	T	S	LN			2.5	8			4
893	UMADEVI	III	33830	24	PRIMI	26.4	12	-	Ecl	T	G	LSCS	FI		2.4	7	yes/RD		10
894	AMBIGA	IV	33648	18	G2A1	21.8	10.5	-	-	T	S	LSCS	FD		3.2	6	yes/MAS		9
895	SARALA	III	34119	30	G2A1	29.4	15.5	-	-	T	S	LN			2.8	9			3
896	SUGUNA	IV	34934	19	G2A1	24.1	8.5	-	-	T	S	LSCS	CPD		3.1	8			8
897	MARIYAMMAL	V	34093	22	PRIMI	26.8	12.6	-	-	PD	G	LN			2.9	8			3
898	GOWRI	III	34953	21	PRIMI	27.2	15	-	-	T	S	LSCS	FD		3	8		yes	14
899	ADHILAKSHMI	IV	34128	23	G2P1L1	28.4	10.5	-	-	T	S	OU			3.3	8			4
900	MURUGAMMAL	II	35875	28	G2P1L1	23.2	10	-	-	T	S	OU			3.1	9			3
901	VASUKI	III	36487	26	PRIMI	33.1	10.5	GDM		T	S	LN			3.2	8			4
902	PRIYADHARSHINI	III	34573	27	G2P1L1	26.4	10.3	-	SEV	T	S	LN			2.8	8			5
903	BANU	IV	34032	21	G2A1	23.4	12	-	-	T	S	OU			2.6	9			4
904	MUMTAZ	III	35129	25	G2A1	28.2	8.4	-	-	T	S	LN			3.3	8			3
905	ANANTHI	IV	35883	26	G3P2L2	22.5	10.2	-	-	T	S	LN			2.8	9			4
906	SHENBAGAVALLI	III	36340	26	G2P1L1	30.9	8.5			T	S	LN		PI	3.1	8			9
907	LATHA	III	36454	23	G2P1L1	24.4	14	-	-	T	S	LN			3	8			4
908	VALARMATHY	IV	27345	22	PRIMI	24.2	12.4	-	-	T	S	LN			2.5	8			4
909	THAJUN	IV	29604	26	PRIMI	29.4	12.6	GDM	-	T	S	OU		PPH	3.7	9			8
910	LALITHA	III	28706	24	G2P1L1	18	10.2	-	GHT	T	G	LN			2.4	8		-	8

911	ASHWINI	IV	29675	28	G2P1L1	23.6	13.2	-	-	T	S	LN			2.6	8			4
912	NANCY	III	30009	29	G2P1L1	28.2	10	-	-	T	S	LN			2.9	9			3
913	BOOMADEVI	II	31765	27	PRIMI	28	12.4	-	-	T	S	LN			3.1	7			3
914	DHATCHYANI	III	36582	29	G2P1L1	24.4	16.7	GDM	-	T	S	LN			3.2	9			5
915	HABEETHA	IV	35983	26	G2P1L1	27.2	10	-	-	T	S	LN			2.7	5			3
916	UMADEVI	IV	35086	20	PRIMI	17.9	8	-	-	T	S	LSCS	FD		2.6	9			8
917	SARANYA	IV	32876	22	G2P1L1	22.6	14.6	-	Mild	T	G	LN			2.8	8			5
918	MEGALA	III	35098	24	PRIMI	26.4	12	-	-	T	S	LN			2.8	9			4
919	GOWRI	IV	36167	18	G2A1	21.8	10.6	-	-	T	S	LN			2.9	9			3
920	NAGAMMAL	III	35878	30	G2A1	29.4	15	-	GHT	T	S	VAC			3.3	9			4
921	LALITA	IV	35843	19	G2A1	24.1	8.2	-	-	T	S	LN			2.8	8			3
922	MEGALA	V	37659	22	PRIMI	26.8	12.5	-	-	PT	S	LN			1.9	7	YES/PT		10
923	UMA MAGESWARI	III	38706	21	PRIMI	27.2	15.3	-	-	T	S	LN			3.1	9			3
924	NAMAGAL	IV	36706	23	G2P1L1	28.4	10.1	-	SEV	PT	G	LSCS	FI		2.1	7	YES/PT	YES	17
925	MEENATCHI	II	35598	28	G2P1L1	23.2	15.5	-	-	T	S	LN			2.8	8			4
926	SEVVI	III	34509	24	G2A1	24.2	10.5	-	Mild	PT	GI	LN			2.1	6	YES/PT	YES	15
927	ASIYA PARVEEN	III	33487	33	PRIMI	27	10.7	-	-	T	S	LN			2.9	8			5
928	GOMATHY	IV	33267	19	G2P1L1	17.9	8.2	-	-	T	S	LN			2.3	9			4
929	VEERAMAL	III	36754	31	G2A1	23.4	12.4	-	-	T	S	LN			2.7	8			4
930	RASATHI	IV	38769	25	PRIMI	21.5	10.5	-	-	T	S	LSCS	FD		2.8	7	YES/MAS		8
931	MAHADEVI	III	37097	20	PRIMI	17.8	10.6	-	-	T	S	LN			2.4	8			4
932	VARALAKSHMI	III	37239	29	G3A2	42	9.5	GDM		T	S	LN			2.9	7			5
933	GEETHA	IV	37349	23	PRIMI	22.8	13	-	-	T	S	OU			3.1	8			4
934	SIVABHAGYAM	IV	37294	29	G2P1L1	28.2	15.5	-	-	T	S	LN			2.9	9			3
935	VIJAYALAKSHMI	III	37479	28	PRIMI	27	10.4	-	-	T	S	LN			3.2	7			4

936	BANU	IV	37562	30	G2P1L1	26.4	10	-	-	T	S	LN			3.1	8			4
937	MARAGATHAM	III	37095	28	PRIMI	24.4	14.5	-	-	T	S	LN			2.5	7			3
938	PUSHPALATHA	II	37562	21	G2A1	18	12	-	-	T	S	LN			2.4	7			4
939	KASTHURI	III	38349	27	G3P1L1A1	24.4	14.6	-	-	T	S	LN			2.9	8			3
940	CHELLAMMAL	IV	38003	20	PRIMI	18.4	10.6	-	-	T	S	LN			2.5	8			4
941	REETA	IV	38110	31	G2P1L1	29	15	GDM	-	T	ELEC	LSCS	CPD		3.8	9	YES/IDM	YES	15
942	KODIMALAR	IV	38452	33	G2P1L1	31.6	9.2	-		T	S	LN			2.8	7			5
943	RENUKA DEVI	III	38598	34	PRIMI	26.4	12.7	-	-	T	S	LN			3.1	9			4
944	AMMA CHELLAM	IV	38139	31	PRIMI	27.5	10.2	-	-	PD	G	LSCS	FI		3.1	8			8
945	VANITHA	III	38452	30	G2P1L1	28.4	15.8	-	ECL	T	G	LSCS	FD		2.4	7	YES/RD		16
946	PUSHPA	IV	31789	21	PRIMI	18.2	12	-	-	T	S	LN			2.3	8			3
947	GEETHA	V	31278	24	PRIMI	30.9	10.5	GDM		T	S	LN			2.8	9			4
948	RASARHI	III	32797	22	PRIMI	22.4	15.2	-	-	T	S	LN		PPH	2.7	7			5
949	RANI	IV	32896	22	G2P1L1	21.6	16	-	-	T	S	LSCS			2.9	8			4
950	CHANDRA	II	32760	20	PRIMI	21.4	8.4	-	-	PT	S	LN			1.9	7	YES/PT		6
951	PREMA LATHA	III	33286	22	G2P1L1	24.1	14.3	-	-	T	S	LN			2.8	8			4
952	NIRMALA	III	33045	33	PRIMI	22.6	10.2	-	-	T	S	LN			2.7	8			3
953	ELAMATHY	IV	34879	20	PRIMI	22.3	12.4	-	-	T	G	LN			2.4	8			3
954	MITHAR	III	34454	26	G2P1L1	29	12.5	-	-	T	S	VA		RP	3.4	9			4
955	MUNIYAMMAL	IV	34456	23	PRIMI	28.4	10	-	-	T	S	LN			2.9	9	YES/RD		3
956	SANGAMITHRA	III	34198	19	PRIMI	18	13.4	-	-	T	G	OU			2.5	8			3
957	LAKSHMI	III	34098	30	G2P1L1	27.2	11	-	-	PD	G	OU			3.2	7			4
958	SANDHYA	IV	34760	27	G3A2	28.4	12.4	-	-	T	S	LN		PI	3.3	8			3
959	SNEHA	IV	34167	21	PRIMI	24.2	15.5	-	-	T	S	LN			2.7	9			4
960	ETTIYAMMAL	III	35985	24	PRIMI	28.2	10.4	-	-	T	S	LN			2.6	9			3

961	SUBBAMMAL	IV	35980	29	G2P1L1	28.4	10	-	-	T	G	LSCS	FI		2.9	9			10
962	ANURADHA	III	35894	29	G2P1L1	27.2	8.5	-	-	PT	S	LN			2.1	8	yes/PT		13
963	KAMATCHI	II	35398	25	PRIMI	23.4	13.4	-	-	T	S	LN			2.4	8			4
964	INDIRANI	III	35980	25	PRIMI	22.8	12.5	-	-	T	S	LN			2.6	8			3
965	THIRIPURASUNDARI	IV	36487	24	PRIMI	24.6	12.4	-	-	PD	GI	LN			2.9	9			3
966	JAYANTHI	IV	37569	25	PRIMI	24.4	12.4	-	-	T	S	LN			2.9	8			3
967	MARAGATHAM	IV	37547	21	PRIMI	26.4	8	-	-	T	S	LN		PI	3.3	9			4
968	NANDHINI	III	37437	34	G2P1L1	27.2	9.4	-	-	T	S	LN			2.9	8			4
969	THAYARAMMAL	IV	37675	28	PRIMI	22.2	15.4	-	-	T	S	LSCS	OLIGO		2.8	7	yes/RD		9
970	MARAGATHAMMAL	III	37865	30	PRIMI	23.1	12	-	-	T	S	LN			2.6	8			3
971	NAVEENA	IV	35687	18	PRIMI	23.2	10.8	-	-	T	S	LN			2.8	8			3
972	RUPALATHA	V	36397	22	G2P1L1	22.4	14.2	-	-	T	S	LN			2.7	9			4
973	SATHIYA	III	36903	24	G2A1	40.2	10	GDM		T	S	LN			2.6	8			4
974	REVATHY RANI	IV	29867	24	PRIMI	23.6	12.4	-	Mild	T	G	VA			2.9	8			4
975	AMUTHA	II	29564	24	PRIMI	18	12.2	-	-	T	S	LN			2.3	7			3
976	SOLAIAMMAL	III	29120	20	G2P1L1	22.8	10.3	-	-	T	G	LN			3	9			4
977	PUNITHAVALLI	III	30093	32	PRIMI	24.2	10	-	-	PT	S	LN			1.8	8	yes/PT		10
978	SUNDHARI	IV	31287	29	PRIMI	26.5	12.2	-	-	T	S	LN			3.1	8			5
979	ALLIAMMAL	III	35895	26	PRIMI	24.2	13.4	-	-	T	G	LN			2.6	7			4
980	ASHA	IV	32467	27	PRIMI	23.6	10.5	-	-	T	S	LN			2.8	8			4
981	ELLAMMAL	III	32657	23	G2P1L1	27.2	12.5	-	SEV	T	G	LN		PPH	2.6	9			6
982	ATHY	III	30453	22	G2P1L1	24.2	13.4	-	-	PD	G	LN			2.7	8			8
983	SARASWATHY	IV	37645	24	PRIMI	17.4	10.2	-	-	T	S	LN			2.5	9			5
984	VALLI	IV	35845	21	G2A1	23.4	11.3	-	-	T	S	LSCS	FD		2.6	8			3
985	RAJI	III	32875	26	PRIMI	22.6	13.3	-	-	T	S	VAC			2.5	8			3

986	SAROJA	IV	32229	19	G2P1L1	23.4	12	GDM	-	T	S	LN			3.4	8			3
987	GIRIJA	III	32874	22	G2P1L1	17.9	11.3	-	-	T	S	LN			2.4	9			4
988	KAMATCHI	II	32988	20	PRIMI	28.4	14.2	-	-	T	G	LSCS	FD		3.1	9			10
989	KALAIVANI	III	34762	28	PRIMI	24.2	10	-	-	T	S	LN			2.6	8			3
990	RANI	IV	35980	26	G2P1L1	36.2	8.5	GDM		PD	G	LN			3.1	8			5
991	PRIYA	IV	35672	21	G2P1L1	23.6	12.2	-	GHT	T	G	LN			2.6	8			4
992	MUNIYAMMAL	IV	36190	25	G2P1L1	18	9	-	-	T	S	LN			2.4	8			4
993	AMULI	III	36092	27	G2A1	24.1	10.2	-	-	PT	S	LN			1.9	8	yes/PT		5
994	VEERAMMAL	IV	37456	29	G2P1L1	23.8	12.2	-	Mild	T	G	LSCS	FI		3	9			11
995	BHAGYALAKSHMI	III	37698	20	G2P1L1	18.2	10.5	-	-	T	S	LN			2.3	8			4
996	SANTHOSHAMMAL	IV	37656	22	PRIMI	22.4	10	GDM	-	T	S	LN			3.5	8	YES/IDM		4
997	NIVETHITHA	V	29018	29	PRIMI	27.2	15.5		-	T	S	OU			3.1	8			5
998	INBAVALLI	III	30156	32	G3P2L2	28.3	15	GDM	-	T	G	LSCS	CPD		4.1	8	yes/IDM	yes	15
999	CHINNAPAPPA	IV	31657	23	PRIMI	23.6	11.4	-	-	T	S	LN			3.1	9			3
1000	KANNAGI	II	32893	27	G2P1L1	34.5	8.4	GDM		PT	S	LSCS	FD		2.8	8	YES/IDM		10
1001	REETA	III	33196	31	G2P1L1	29	15	GDM	-	T	ELEC	LSCS	CPD		3.8	9	YES/IDM	YES	15
1002	KODIMALAR	III	38734	33	G2P1L1	31.6	9.2	-		T	S	LN			2.8	7			5
1003	RENUKA DEVI	IV	38745	34	PRIMI	26.4	12.7	-	-	T	S	LN			3.1	9			4
1004	AMMA CHELLAM	III	39874	31	PRIMI	27.5	10.2	-	-	PD	G	LSCS	FI		3.1	8			8
1005	VANITHA	IV	37643	30	G2P1L1	28.4	15.8	-	ECL	T	G	LSCS	FD		2.4	7	YES/RD		16
1006	PUSHPA	III	37650	21	PRIMI	18.2	12	-	-	T	S	LN			2.3	8			3
1007	GEETHA	III	32564	24	PRIMI	30.9	10.5	GDM		T	S	LN			2.8	9			4
1008	RASARHI	IV	37565	22	PRIMI	22.4	15.2	-	-	T	S	LN		PPH	2.7	7			5
1009	RANI	IV	37654	22	G2P1L1	21.6	16	-	-	T	S	LSCS			2.9	8			4
1010	CHANDRA	III	36008	20	PRIMI	21.4	8.4	-	-	PT	S	LN			1.9	7	YES/PT		6